

THE  
BRITISH MEDICAL OFFICER'S  
INDIAN MANUAL,

COMPILED FROM

G. G. O., G. O., G. O. C. C., DEPARTMENTAL, ADJUTANT  
GENERAL'S, QUARTER MASTER GENERAL'S, AND  
COMMISSARIAT CIRCULARS—P. W. CODE,  
*&c., &c., &c.*

BY

D. A. CAMPBELL FRASER, M.D.,  
*Surgeon, Royal Bombay Fusiliers.*

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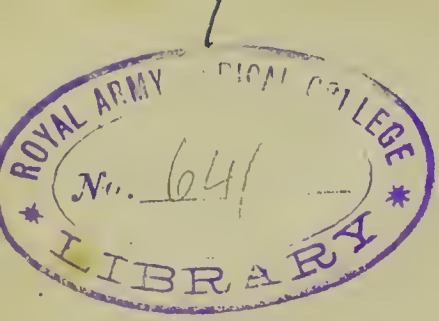
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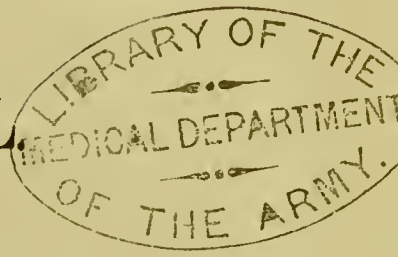
*Military Regulations*



*10 Feb 1871*

THE

# BRITISH MEDICAL OFFICER'S INDIAN MANUAL



*8/12*

COMPLETED UP TO 1<sup>ST</sup> OCTOBER,  
1870.

COMPILED BY

D. A. CAMPBELL FRASER, M.D.,

*Surgeon, 103rd Royal Bombay Fusiliers.*



1870.

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## P R E F A C E.

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THE British Medical Officer's Indian Manual has been compiled with a view to supply full information regarding medical regulations in this country, in so far as these differ from those contained in the Medical Regulations of 1857. Extracts from General Orders and Circular Memoranda, which, I trust, may prove useful to Medical Officers serving in India, have likewise been added.

I beg to record the obligations I am under to Dr. Muir, c. B., Inspector-General of Hospitals, British Forces, for the kindness with which he furnished me, through his Secretary, Dr. Bleckley, with copies of departmental circulars issued between 1864 and the present date.

D. A. CAMPBELL FRASER, M. D.,  
*Surgeon, Royal Bombay Fusiliers.*

ROORKEE,  
1st October, 1870.



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THE  
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SECTION I.

ACCOUNTS.

THE different payments made monthly, by the Regimental Surgeon, on account of the fixed and temporary Hospital establishments, are as follows :—

1. Compensation for House Rent to Medical Subordinates.

The following is the form used :—

H. M.'s Indian Government \_\_\_\_\_ Dr.

*To expenses incurred on account of House Rent, for the month  
of \_\_\_\_\_ 187 .*

RANK AND NAME.	Authority.	Rate.	Valuation by Station Committee.	AMOUNT.
Apothecary.	As per certificate attached from.....to..... 187...	At Rs. 30 per mensem.		
”				
”			TOTAL ...	

*Surgeon.*

The following certificate must be attached :—

I certify that Quarters, on the scale prescribed for their rank, could not be supplied to the undermentioned Medical Subordinates during the following periods :—

Apotheary	...	...	from	to
Assistant Apotheary	...	„	„	„
Passed Apprentice	...	„	„	„
Apprentice	...	...	„	„

And that those provided for their use were valued by a Station Committee at \_\_\_\_\_.

For Apotheary	...	...	Rs.	per mensem.
„ Assistant Apotheary	...	„	„	„
„ Passed Apprentice	...	„	„	„
„ Apprentice	...	...	„	„

\_\_\_\_\_  
*Barrack Master.*

\_\_\_\_\_  
*Surgeon.*

(Station \_\_\_\_\_ date \_\_\_\_\_.)

This certificate, after being signed by the Barrack Master, is to be forwarded along with the bill to the Executive Engineer, Public Works Department, who will remit the amount due to the Surgeon.

2. A.—Apprentices' compensation for ration money on Form No. 5 C, duplicate. A certificate from the Surgeon must accompany this to the effect that the Apprentices in question did not draw rations during the period specified.

B.—Apprentices' compensation for clothing is authorized to be indented for, through the superior medical or regimental authorities under whom the Hospital

G. G. O. 953, 1870.

Apprentice may be serving, at the following rates :—

Superfine blue Cloth Jacket	Rs. 4 0 0	White Drill Tunic	... Rs. 2 0 0
Fine Oxford mixture Trousers	„ 5 8 0	White Drill Trousers	... „ 2 0 0
Spanish White Waistcoat	„ 3 0 0	Forage Cap	... „ 3 8 0

3. Nurse's compensation for Beer. The following form is used :—

To compensation in lieu of Beer, from \_\_\_\_\_ to \_\_\_\_\_ 187 ,  
 (dates included) at 1½ annas per diem. *Vide* Government letter, No. 27  
 of 1864.

Hospital Nurse	.....	Rs.	.....
			Total Rs....
			Received payment,

\_\_\_\_\_  
*Surgeon.*

Certified that the health and energies of the abovenamed Nurse have not suffered from her not having taken Beer.

\_\_\_\_\_  
*Surgeon.*

4. Payment of fixed Hospital establishment. Bengal Form No. 36, duplicate.

5. Compensation for dearness of provisions for fixed 2nd class Hospital establishment. Bengal Form No. 166, duplicate.

A certificate, signed by the Cantonment Magistrate of the Station, notifying the Bazaar price current for the period specified, must accompany this.

Compensation for dearness of provisions is only to be given to *fixed permanent* Military establishments, in receipt of fixed rates of pay, in a literal and strict sense : menials and temporary servants, although they may happen to have a long continuous service, do not come under the order in force on this subject.

G. O. 46,  
 15th March, 1870.

6. The whole of the *permanent* 2nd class Hospital establishment is entitled to receive Batta in camp and on the march, at the rate of (1) one rupee per month per man.

7. Payment of temporary Hospital establishment for pulling Punkahs and watering Tatties. Bengal Form No. 176, duplicate. A statement, signed by the Barraek Master, of the number of each class allowed, and by the Commissariat Officer, notifying the authorized rates of pay for these, as well as a certified copy of the Division, Brigade, or

Station order, authorizing the entertaining of the servants in question from the date specified, must accompany the first charge each year.

8. The pay of extra Regimental Hospital servants entertained in consequence of the regiment being divided into wings and detachments, should be charged in the pay list of the Subordinate Medical and fixed Hospital establishments supported by the original indent sanctioned by the Deputy Inspector-General of Hospitals.

Letter B. J.  
385,  
23rd September, 1870.  
From Examiner, Pay  
Department,  
To Paymaster, 103rd  
Fusiliers.

The pay of extra establishments for Cholera Hospitals is paid by the Commissariat Department.

9. All Hospital servants are entitled to "return pay," if discharged at the end of a march, calculated at twenty *coss* a day from the place at which they may be discharged to that from whence they came. The rate per day for mates is three annas, and that for bearers two annas, calculated at ten *coss* a day for the number of days' journey.

10. Payment for all "extra carriage" for the use of sick on the march (*viz.*, extra dooley-bearers, covered country carts, &c.) is made by the Commissariat Department, and not through the Surgeon.

11. The Hospital Sergeant's pay is drawn by him, through his Company.

Compensation for rations, for Hospital Sergeant, is drawn through the Surgeon, by bill on the Paymaster, a certificate being attached, to the effect that the Hospital Sergeant in question did not receive Hospital diet during the period specified.

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## SECTION II.

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### AMBULANCE CARTS.

1. Ambulance Carts attached to Regimental Hospitals are to be borne on the Quarter-Master's return of Tents and other marching equipments; but those used in Stations for general purposes, and not attached experimentally to Hospitals, will be in charge of Barrack Masters.

G. O. C. C.  
27th May, 1862.

2. Indents are authorized every six months for a supply of grease and tar, at the rate of 8 oz. monthly, for each pair of wheels in use for Ambulance Carts; Axletree-arms hereafter found to have been neglected, will be renewed at the cost of the officer in charge.

G. O. C. C.  
19th November, 1862.

3. Ambulance Carts are received as required from the Barrack Department in the same manner as Hospital Furniture (Form No. 3 B.)

4. Bullocks and driver for Ambulance Cart are obtained from the Commissariat Department by indent (Form No. 8, duplicate), bearing the countersignature of the Deputy Inspector-General of Hospitals of the circle. Payment for these is made monthly, by the Purveyor on certificate from the Surgeon, that the bullocks and driver in question were employed for the period specified.

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## SECTION III.

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### APPOINTMENTS—APPLICATIONS FOR ACTING.

1. A.—All applications for appointments from medical officers of Her Majesty's Service are in future to be forwarded through commanding officers to the Adjutant-General, for transmission to the Inspector-General of Hospitals, British Forces.

G. O. C. C.  
12th August, 1863.

B.—Medical officers with a good colloquial knowledge of the native languages, should, whenever possible, be appointed to the medical charge of Divisional or Brigade Staff.

G. O. 212,  
15th August, 1870.

2. The Commander-in-Chief desires that, in future, all applications from officers for employment, are to be accompanied by statements of services; and in cases when applicants have been mentioned in despatches, extracts from G. O. are to be furnished.

G. O. C. C.  
26th April, 1864.

3. Passed Hospital Apprentices, when in subordinate medical charge of Troops, will have temporary warrant rank as Assistant Apothecaries when so employed. These appointments must be confirmed by His Excellency the Commander-in-Chief in General Orders, before any extra allowance can be admitted.

G. G. O. 550,  
2nd June, 1868.  
Letter 586 from Officiating Secretary to Government of India, 26th October, 1869.

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## SECTION IV.

## ARRIVAL AND DEPARTURE REPORTS.

1. Officers returning from furlough, proceeding to England, arriving on duty, or on leave, will be particular to announce their arrival at, and departure from, Calcutta, to the proper authorities.

G. O. C. C.  
14th October, 1862.

Officers residing temporarily in Calcutta will also report themselves twice a month to the Divisional Adjutant-General, Fort William.

2. All officers on arrival in Bombay, from Europe, or leave out of India, are to report their arrival by letter direct to their respective Regiments or Brigades.

G. O. C. C.  
4th May, 1863.

3. All officers of the British Service returning from leave to Europe, are to report themselves personally to the Military Authorities at the port of debarkation. Medical officers arriving in India are also to report their arrival to the senior medical officer at the port of debarkation.

4. An officer's arrival in India dates from the day of his report of his arrival, at whatever port he may, in good faith, disembark with that object.

G. O. 113,  
30th May, 1867.

5. Medical officers returning to England viâ Bombay, or proceeding thither on duty, are instructed to report their arrival (with the least possible delay) to the Inspector-General of Hospitals, H. M.'s British Forces, in that Presidency, to whom they should also notify the date of their departure.

Departmental Circular 25  
68'  
18th July, 1868.

6. Medical officers, on joining or rejoining their corps, on arrival at their station, or on departure for any period beyond ten days' leave, must report the same departmentally.

6. When a medical officer re-joins his corps or department from leave of any description, he must report his arrival *direct* to the Inspector-General of Hospitals, as well as to the administrative medical officer of his circle.

Departmental Circular <sup>36</sup>/<sub>67</sub>  
16th September, 1867.

7. Officers arriving at Simla should report their arrival and place of residence, in writing, to the Adjutant-General of H. M.'s Forces in India, and they should also notify the date of their departure. If on privilege leave, the period for which it has been granted should be specified.

G. O.  
17th June, 1860.

Those arriving at other hill stations will make a similar report to the Commandant of the Station.

8. Medical officers, British Forces, on leave at Simla, will also report their arrival and place of residence to the Inspector-General of Hospitals, British Forces, there; the date of their departure must likewise be reported to the Inspector-General.



## SECTION V.

## BUILDING—ADVANCES FOR.

1. Advances will be made by Government on the formation of new cantonments, or, when suitable accommodation is not obtainable, in existing military cantonments, at moderate rents, to enable officers to erect houses, on the following scale :—

G. O. 249,  
21st October, 1867,  
and  
G. O. 16,  
11th January, 1869.

For Lieutenant-Colonel ...	Rs. 5,400
„ Major ...	„ 4,320
„ Captain ...	„ 2,700
„ Subaltern... ..	„ 1,800

Medical officers according to relative rank.

2. These advances will be issued in each case by instalments : one-third of the amount when the advance is sanctioned ; one-third when it has been certified by the Executive Engineer, or the commanding officer of the station, that the house is half finished ; and the remaining third when it is completed.

G. G. O. 188,  
15th February, 1869.

3. When an officer is transferred to another station, after receiving, under the provisions of G. G. O. 188, of 15th February, 1869, one or two instalments of the advance sanctioned for him for building a house, he is allowed to draw the remaining portion of the advance.

G. O. 117,  
20th May, 1870.

4. The building should, if possible, be in the officers' own lines, and if no site for building is available in these lines, a certificate to that effect, from the Officer Commanding the Station, should accompany the application, and, under all circumstances, a sketch of the position of the building with reference to the lines of the corps.

G. O. 16,  
11th January, 1869,  
and  
G. O. 225,  
6th July, 1868.

G. O. 124,  
19th April, 1868,  
and  
G. O. 16,  
11th January, 1869.

5. Advances are made to warrant officers according to rank, to enable them to erect houses.

## SECTION VI.

## CANTEENS.

1. Malt Liquor issued to Canteens from the Commissariat Stores is to be reserved exclusively for the use of non-commissioned officers and soldiers, and their wives, on the effective strength of the army.

G. O. C. C.  
2nd June, 1865.

2. The allowance of Malt Liquor and Spirits per diem, is—

1 Dram Rum	}	per man.
1 Quart Malt		

This allowance is not to be exceeded, except under the following circumstances :—

G. O. C. C.  
21st June, 1864,  
and  
G. O. 269,  
14th September, 1869.

(a.)—When a regiment takes the field, two drams of Rum may be issued, should the commanding and medical officers consider it desirable.

(b.)—To players at a Cricket Match an extra pint of Porter may be issued, under orders of the commanding officer, provided the total allowance for that day's issue be not exceeded.

G. O. 276,  
27th September, 1869.

G. O. 259,  
7th September, 1869.

3. Defaulters are entitled to receive one pint of Beer at dinner time only.

4. The issue of Ale or Porter at the dinner hour must be restricted to one pint for each man, drinking it at that meal, and that quantity is invariably to be the limit of any one issue.

G. O. 276,  
27th September, 1869.

5. A medical officer is to visit the Canteen weekly, and examine and test the quality of the different articles issued in the Canteen.

G. O. C. C.  
2nd June, 1865.

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## SECTION VII.

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### CHAPLAINS.

1. (*a.*)—A book, entitled “the Chaplain’s register of his  
Adjutant-General’s Cir- visits and services in the \_\_\_\_\_ Hospital,”  
cular 57E., shall be placed in every European Hospital.  
9th July, 1863.

(*b.*)—These books will be provided by Chaplains, and will be quite distinct from the visitors’ book now in use in Military Hospitals.

(*c.*)—They will be kept for the information of the Bishop, and be open to the inspection of the Military and Hospital Authorities.

(*d.*)—These books are not to be removed from the Hospital, and the responsible medical officer in charge will arrange for their safe custody, and production when required by the clergyman, or for inspection.

2. The chaplain will visit the European Hospitals at least twice  
G. O. C. C. in every week, and oftener when his presence is  
20th July, 1863. called for.

3. The chaplain will affix his signature to the entries of these  
Idem. religious ordinances (when performed by him)  
which are made in the regimental register book.

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## SECTION VIII.

### CHARGERS.

1. When an officer selects two chargers, double time will be allowed for payment, the deductions in all cases to commence with the first issue of pay after the date of selection.

G. O. C. C.  
28th September, 1864.

2. When an officer has selected, and been put in possession of, a charger, he will immediately furnish a descriptive roll of, and receipt for, the horse selected, in duplicate, to the Officer Commanding the Corps.

Idem.

3. The sum of Rs. 600 has been fixed as the price to be paid for chargers selected from re-mounts by officers of the mounted branch, including those belonging to Batteries of Field Artillery.

G. O. 153,  
26th July, 1866.

4. Medical officers of mounted Regiments, when on leave, whether on private affairs or on medical certificate, if in receipt of Indian allowances, shall continue to receive the horse allowance of their rank provided they keep up their chargers, and no extra charge is incurred by the appointment of officers to perform their duties during their absence.

G. O. 177,  
26th May, 1868.

5. Medical officers having the relative rank of field officer are to provide themselves with chargers and horse furniture, and to appear mounted when required to attend parade.

Adjutant-General's  
Circular,  
3rd March, 1868.

G. O. 278,  
26th November, 1867,  
and  
G. O. 172,  
14th May, 1868.

6. (a.)—A medical officer of the rank of field officer, is entitled to have his charger conveyed free, when the mounted officers' chargers are so conveyed.

(b.)—Mounted officers on duty will be entitled to conveyance by rail at the public expense for the number of chargers authorized to them, with their equipment and attendants.

G. O. 239,  
24th October, 1866.

7. An officer arriving in this country and proceeding to join his regiment or appointment, when his duties require him to be mounted, may, if he provide himself with a charger on the spot, be allowed a pass for the charger by rail. On arrival at his destination, he must forward to the Quarter-Master General the requisite certificate that the horse thus carried has been passed as a charger; failing this, the amount due on the pass will be recovered from the first issue of pay due to the officer.

G. O. 98,  
11th May, 1867.

8. The undermentioned officers are, when proceeding on permanent duty at Government expense, entitled to transport by rail or on boardship for their chargers, according to the following scale:—

G. O. 242,  
20th July, 1868.

	Ordinary.	Field Service.
Inspector-General of Hospitals ...	2	4
Deputy „ „ ...	2	3
Staff Surgeon-Major in charge of a circle ... ..	2	0
Field and Staff Surgeon-Major or Surgeon ... ..	1	2

9. In future, officers will be charged for the feed of their horses while on foreign service at a uniform rate of eight annas per diem, whenever forage is supplied by the commissariat or from the public stores.

G. O. 251,  
30th July, 1868.

10. Warrant officers are not entitled to horse allowance when employed on service in the field.

G. O. 55,  
3rd March, 1869.



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## SECTION IX.

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### CHOLERA.

The following revised rules regarding the measures to be adopted on the outbreak of cholera amongst British Troops, are published in supersession of all former orders on the subject.

G. O. 193,  
3rd August, 1870.

*Precautions necessary in anticipation of the appearance of Cholera.*

1. The outbreak of cholera is often so sudden and virulent, that all precautionary measures must be taken before-hand. It is essential that every station should be preserved in a state of constant preparation to meet a danger which may come at any time. The personal cleanliness of the men is a matter of much consequence as a preventive measure.

2. If an outbreak appears probable, every ordinary precaution should be attended to with increased vigilance; but if the disease has actually appeared in the cantonment or its vicinity, more harm than good is likely to arise from any attempts at improvement which may then be made. This is not the time to cleanse foul drains or to remove nuisances which may have hitherto been neglected, and such possible sources of disease should, in these circumstances, be left undisturbed.

3. Whenever cholera is to be apprehended, the Staff Surgeon and Cantonment Magistrate should keep a special watch on the condition of the bazaars, and any case of cholera should be immediately reported to the Officer Commanding the Station. The register of deaths should be carefully scrutinized.

4. Especial care should be taken to prevent crowding in barracks and hospitals, and, when considered advisable during the hot season, a portion of the men should be permitted to sleep in the outer verandahs, or in tents pitched for the purpose in the vicinity of the barracks. If cholera threatens, even though the men may have the full regulated amount of space, they should be spread out as much as possible, advantage being taken of any spare buildings which can be conveniently employed.

5. The early treatment of premonitory symptoms is of very great importance, and of these looseness of the bowels is the chief. At seasons, therefore, when cholera threatens, and still more so when it is more than usually prevalent, commanding officers should give the most precise orders on this subject, and see that measures are taken for paying the most vigilant attention to the health of the men in barracks, and for treating there, or in observation wards entirely separate from the hospital, all slight cases of diarrhœa or other disease, which, if neglected, might pass into cholera. As the men during cholera time have a natural dread of going into hospital, and are apt on this account to conceal the early symptoms in order to escape being sent there, it is of importance that every facility for the immediate treatment of diarrhœa should be afforded them in barracks. Non-commissioned officers in each room should accordingly be provided with suitable medicines, care being taken that the proportion of opium or any other dangerous drug should be small.

6. Whenever new buildings are being carried on, it is most important, with regard to the health of their future occupants, that the ground and water in the neighbourhood should be protected from pollution.

7. Communication with infected localities should be prevented.

The provision of stores attached to the regimental canteen should be encouraged, so that soldiers and their families may be able to supply their wants without going to the city or bazaars.

9. Officers Commanding Divisions, Districts, or Stations, as well as all Sanitary Officers, will make themselves thoroughly acquainted with the ground in the neighbourhood of their stations to the extent of 20 miles, with a view to the selection of sites for encampments in

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the event of cholera appearing, as well as to such measures being taken as they may deem advisable to remove or counteract any probable source of disease.

10. The Officer of the Quarter-Master General's Department attached to the command, will prepare a plan of the neighbouring country, with plans of encamping grounds marked.

11. In selecting these encampments, enquiry should be made into the previous character of the neighbourhood with regard to liability to cholera or exemption from it. The ground should, when possible, be high, with natural facilities for drainage, with a plentiful supply of good water and, if possible, easy of access. Although rank vegetation is objectionable, the presence of large trees should be considered advantageous, because they add to the salubrity of the air, and because their shade will be valuable.

12. It is very desirable that several such places should be selected, and that their distance from cantonments should vary, some being close at hand and others further off.

13. These selections can best be made in the rainy season.

14. When sites for camps have been selected and approved by competent authority, care must be taken that they are always kept in a fit state for occupation, and it must be understood that, in the event of the troops going under canvas, these are the places which, as a general rule, are to be used. If, however, during the hot and rainy seasons, any buildings entirely separate and away from cantonments are available, they should be used in preference to placing men in camp, especially when the ground is either covered with water, or when it is drying up in the months of August and September.

15. Encamping grounds on great lines of communication are objectionable.

16. These should only be resorted to when no others are available.

18. The construction of earthen platforms at these camps is not considered generally necessary.

19. In all divisions or districts on the line of railway, encamping grounds, in addition to those already referred to, will be selected in



suitable localities within 50 or 70 miles of military cantonments on these lines. The spots chosen should not be further than one or two miles from the railway, and, if possible, in its immediate vicinity.

*Measures to be adopted on appearance of Cholera.*

20. On cholera appearing, either in the neighbouring villages or in the cantonments, the authorities must be prepared for immediate action; every ordinary sanitary precaution must continue to receive increased attention, and every necessary measure prepared for placing the troops under canvas, should this be required. Everything must, as far as possible, be considered beforehand, so that, when the necessity occurs, there may be no doubt regarding the course to be pursued, and no reason for delay. The most suitable encamping grounds must be decided on, the vicinity of places in which cholera is prevalent being, of course, scrupulously avoided. General and other officers in command should act in anticipation of sanction on their own responsibility, and on the advice of the senior medical officer, reporting fully at the same time to the Quarter-Master General, for the information of His Excellency the Commander-in-Chief, the measures they may have adopted to arrest the progress of the disease.

21. If cholera has been prevalent in the neighbourhood, and there is, therefore, reason to fear that it may attack the troops, a preparatory camp should at once be formed. This need not ordinarily be done until the disease has actually appeared in the cantonment; but if more than one case occur among the European soldiers or their families under such circumstances as have been above stated, the formation of the preparatory camp should be considered imperative. Tents should be pitched at the nearest selected ground, which, if possible, should not be further distant than two or three miles from the cantonments, so that all may be in readiness for a move in case it may be necessary. The size of this camp will, of course, depend on the strength of the garrison, and other circumstances. In some cases, it will be advisable to provide for a proportion of the whole garrison, in others only for part of a particular regiment or battery. The exact size of the camp must be decided by the local authorities after a full consideration of all the facts and of the amount of danger to be anticipated. The previous history of the station as regards cholera will afford valuable data on this point.

22. All unnecessary alarm should be prevented.

25. The transmission of information regarding cholera need cause no alarm. The belief that the authorities are alive to the danger, and prepared to meet it, will tend to allay rather than to increase unnecessary alarm.

26. The utmost unanimity is essential in all Departments to give effect to the above recommendations; all should work cordially for the public good and in constant communication with the Civil authorities, whose hearty co-operation is especially needed with regard to the supply of carriage.

28. Special attention should be paid to everything which can tend to the improvement of the general health of the men. Every effort should be made to relieve them from duties which cause needless exposure and fatigue, and especially to avoid night duty, so far as this may be possible with due regard to military considerations; to ensure that their food is wholesome, and their clothing appropriate; and to promote every means of healthy amusement and occupation.

29. It often occurs that soldiers, on a visitation of cholera, indulge in the use of spirituous liquors, under the impression that they are a preventive against the disease. Medical authorities unanimously condemn this baneful practice as a certain promoter of the disease, and commanding officers should therefore exert their influence in every way to prevent it.

30. On a case of cholera occurring in any building occupied by European troops, the room, or portion of the room or building in which it occurred, should be IMMEDIATELY vacated, and, except for the purpose of purifying it, no one should be allowed to enter it,—if the whole building can be left, it will be still better. This is laid down as an absolute rule; for, although individual cases of cholera sometimes occur when there is no reason for anticipating an outbreak, instant removal from an infected spot is the best safeguard; and besides, the building in which the disease has shown itself should be vacated for the purpose of being purified. When men, under the above circumstances, are removed from a building supposed to be infected, they must be kept separate, so far as may be possible, from the men among whom the disease has not shown itself, and, in arranging for their accommodation, care must be taken that there shall be no over-crowding

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either of them or of others. Should no separate buildings be available, it is desirable that they be placed under canvas.

31. In carrying out this rule, it is not however necessary that the tents should be pitched in one of the encamping grounds. They may be placed in some convenient spot in the cantonment; and where only an individual case has occurred among the body of men so removed, this arrangement will, as a rule, be the best which can be adopted.

32. When any case of cholera occurs, even though it may be but a solitary case, the room in which the disease has shown itself must be thoroughly purified without the least delay. The walls, floors, and punkahs should be scraped and white-washed; the wood-work should be subjected to the action of hot caustic lime-wash, furniture and ropes washed, punkah-fringes boiled, and generally everything possible done for the purification of the building; the latrine, urinary, and wash-house used by the man who was attacked should be instantly closed, and their use must not be permitted until they have been completely purified. Chloride of lime, Condy's fluid, or some other chemical disinfectant should be freely used. All filth and rubbish from the latrine must be buried at a distance, and all vessels used for their removal must be carefully cleaned and disinfected at the place where the refuse is deposited. Until the purification of the buildings is complete, the troops must, under no circumstances, be allowed to re-occupy them.

33. Ten days after removal, and when the room or building which was vacated has been purified in the manner above described, it may be re-occupied, provided no other circumstances have occurred in the meantime which may render such re-occupation undesirable. On this point the opinion of the principal medical officer on the spot must be taken.

34. If a second case of cholera appears among the particular body so removed, they should be again moved, and the infected building or tent which they occupied should be at once vacated and purified. If a third case occur among this particular body within one week from the occurrence of the first case, then the men composing it should be immediately removed from the station to the preparatory camp.



35. In many instances the procedure here laid down, if carried out with promptitude in successive instances, will be found sufficient to arrest the further spread of the disease; but when cases occur in several buildings, either simultaneously or at short intervals, and especially if there be at the same time any unusual prevalence of diarrhoea, an outbreak of cholera is seriously to be apprehended, and it will, under such circumstances, be advisable at once to remove the inmates of infected buildings to the encampment outside cantonments.

36. It is to be remembered that, when an outbreak threatens, removal from the infected locality is the only remedy in which any confidence can be placed, and that the earlier the movements are carried out, the greater will be the chance of success.

37. Cholera evidently attaches itself to particular localities. The principle to be borne in mind, therefore, is that the particular locality in which cholera shows itself must be looked upon as dangerous, that it must be immediately abandoned and all communication with it stopped, and that the body of men who have been exposed to danger by their occupation of the place in which the cause of the disease is presumed to be present must be separated from the rest of the troops. If, for example, this body consists only of the inmates of some one building, the measure need only be applied to them; if some particular battery, troop, or company be attacked, it will be similarly dealt with. A whole regiment or the whole of the troops at the station need only be sent into camp, when it is found that the measures already adopted have not stopped the progress of the disease, or there is reason to fear they will be insufficient. As a rule, it is necessary only to vacate such buildings as have actually presented cases.

38. When separate detachments are moved into camp in the manner indicated, it is advisable that they should be kept distinct as far as possible. Officers Commanding Stations are authorized to call freely for medical aid from other stations, districts, or divisions free from cholera. And where a separate hospital establishment cannot be assigned to each party, it may be convenient to place a hospital in some central position not far removed from two or more camps, the sick from which may be treated together. Such arrangements must be left to the decision of the local authorities. A central cholera

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hospital should on no account be established in cantonments for the reception of cases from camp and other quarters.

40. No move by rail is to be made without sanction from Army Head-Quarters.

41. In travelling by rail it will be better to select the day than the night. On no account are cases of cholera or choleraic diarrhoea to be placed in a Railway carriage, and any persons who have come in contact with such cases should have their clothes fumigated with sulphur, and their hands and other uncovered portions of the body washed with a solution of McDougal's disinfective powder before starting.

42. In some cases to avoid fatigue, it may be advisable to encamp the men close to the station of departure, so that they may start by rail in the early morning, and they may encamp again for a night close to the station of arrival before going on to the selected ground next morning.

43. Previous to detachments proceeding by rail, the Military authorities must arrange for trenches being dug in the vicinity of one or two of the stations at convenient intervals on the journey, so that all discharges may be received in them. The troops on no account should be allowed to use the Railway Station latrines.

44. After occupation by the troops, and in the presence of the Railway authorities, all the carriages, which must be only those of the 2nd and 3rd class, are to be washed, under regimental arrangements, with boiling water, containing in each gallon a wine glass-full of carbolic acid, after which sulphur should be burned in each, and the doors and windows kept closed on the sulphur fume for two hours. These disinfectants must always accompany the troops, and their supply be ensured by the Medical authorities.

45. As the movement will be made in the hope that the troops may be in this manner carried out of the infected area, the camp will probably be occupied for some time, and the strictest possible attention should be paid to the conservancy, trenches should be dug to leeward, tents pitched over them, and all filth instantly covered with earth. A similar system should be adopted for the camp-followers and other natives. The strictest regulations must be laid down and

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enforced by the commanding officer to censure attention to this all-important point.

46. In arranging the camp the tents should be spread over a large area, and any military considerations or regulations in regard to distances between tents, should give place to the desirability of allowing free ventilation, so far as this can be done with convenience. Tents should not be pitched immediately under trees, as they prevent the free access of air at night, and during the rains prevent their drying.

47. As a rule, not more than eight men should be placed in each tent.

48. Immediate benefit is not always to be expected from the movement into camp, and the occurrence of a few cases of cholera ought not to be looked upon as proof that the change has proved a failure. It is clear that men often take with them the seeds of cholera, and, although the immediate cessation of the disease is by no means uncommon, it is unreasonable to suppose that this will be always the case. Even if the first apparent result be an aggravation of the disease, this need cause no discouragement.

49. If the disease continue to be virulent for more than three or four days, a fresh encamping ground may be tried, either on the line of rail, or by a short movement, at right angles if possible to the prevailing wind, or track of the disease. The marches should always be short, if possible not more than two or three miles; movements should generally be made in the morning, in time to admit of the new ground being reached soon after sunrise, but if the march is very short, it may be made in the evening, whenever the delay of a night is regarded as an unadvisable risk. The men will be supplied with hot tea or coffee before starting; they will invariably wear flannel belts, and every precaution must be taken to prevent their remaining in damp or wet clothes, especially when the movements are made by rail. It is of the utmost importance that fatigue and exposure should be avoided, and everything possible should be done to keep the men cheerful and in good spirits.

50. If any case of cholera or diarrhœa occurs in camp, isolation and disinfection should be had recourse to, and all communication



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between the camp and any neighbouring station or village should be interdicted. The hospitals in particular should be isolated to as great an extent as may be practicable.

51. When all the troops in a station are sent into camp on account of an outbreak of cholera, all ordinary sick capable of being removed without evident danger should go into camp also; the few patients who cannot possibly be moved should be transferred to one small general hospital, which will usually be found sufficient for all those who must remain in cantonments. Separate hospitals should always be organized in the camps, and under no circumstances should patients be brought for treatment from the camps to a hospital in cantonments.

52. When considered desirable by the principal medical officer on the spot, cots are to be taken into camp for all the men, so that there may be no necessity for their sleeping on damp ground.

53. The utmost attention must be paid to the drinking water. At encamping grounds which have been frequently used, and which are situated upon great thoroughfares, caution will be especially necessary, and, if considered desirable, temporary wells must be sunk, so that there may be no danger of water contaminated by organic matter being supplied to the troops. As a precautionary measure the water used for drinking should be boiled; and as the taste of water subjected to this process is insipid, the reason for this proceeding should be carefully explained to the men. It is left to the Local, Military, and Medical authorities to decide whether the filters belonging to British regiments are to be taken with them when the troops are moved into camp on account of cholera or not.

54. Wood fires may be maintained to the windward of camp when considered necessary by the Medical authorities.

55. It not unfrequently happens that troops are allowed to return far too soon to cantonments or to buildings which have been infected with cholera, and the consequence is the re-appearance or aggravation of the disease. The return to cantonments must only be allowed with the greatest caution. No part of the cantonment from which the disease has not altogether disappeared should be re-occupied. Under no circumstances can the re-occupation of any building which has been attacked by cholera be allowed, unless at least ten days have elapsed

since the last case of cholera in the building, nor until every measure for the purification of the building, as laid down in paragraph 32, has been carried out. The prevalence of fever or other diseases in camp is no reason for returning to cantonments while danger from cholera remains. It must be accepted as the lesser evil of the two.

57. During the continuance of cholera at any station, the officer in command is to report by post weekly to the Quarter-Master General, for the information of His Excellency the Commander-in-Chief (with respect to the steps to be taken for the mitigation of the evil), on the general sanitary condition of the station, including bazaars, and on the health of the population around on a considerable radius. The report should state in detail the number of cases, the class of persons attacked, the number who may have died, and the general character of the disease, whether virulent or not.

58. When cholera appears at a station, the following returns are to be kept by regiments of British Cavalry and Infantry, and batteries of Royal Artillery:—No. 1 is to be furnished daily by medical officers to the officer commanding the regiment or battery, as the case may be, for the information of the Officer Commanding the Station, and a duplicate to the Deputy Inspector-General of Hospitals, Her Majesty's British Forces. At the termination of the epidemic the Nominal Register (Form No. 2) is to be submitted to the Deputy Inspector-General of Hospitals, and by him forwarded for the information of the Inspector-General.



No. 1.

Morning State of Cholera in the \_\_\_\_\_  
 STATION \_\_\_\_\_, Date \_\_\_\_\_

DISTRIBUTION OF CORPS.	Strength.	CASES OF CHOLERA.						REMARKS.
		Remained.	Admitted during the last 24 hours.	TOTAL.	Discharged.	Died.	Remaining.	
IN CANTONMENT BARRACKS.								
Officers .. .. .								
Men .. .. .								
Women .. .. .								
Children .. .. .								
TOTAL .. .. .								
IN CAMP IN CANTONMENTS.								
Officers .. .. .								
Men .. .. .								
Women .. .. .								
Children .. .. .								
TOTAL .. .. .								
IN CANTONMENT HOSPITAL.								
Men .. .. .								
Women .. .. .								
Children .. .. .								
TOTAL .. .. .								
IN CAMP AT _____								
Officers .. .. .								
Men .. .. .								
Women .. .. .								
Children .. .. .								
TOTAL .. .. .								
IN CAMP AT _____								
Officers .. .. .								
Men .. .. .								
Women .. .. .								
Children .. .. .								
TOTAL .. .. .								
GRAND TOTAL .. .. .								

\* This should include the 24 hours from 8 A. M. to 8 A. M., so as to give the latest information. It should be made up after the Surgeon's morning visit to hospital.

Summary.

	Strength.	No. of cases previously reported.	No. since admitted.	TOTAL.	No. of deaths previously reported.	No. since last report.	Total deaths.	Number remaining.
Officers .. .. .								
Men .. .. .								
Women .. .. .								
Children. .. .. .								
TOTAL .. .. .								

Surgeon in Medical charge.



60. On the disappearance of the disease, Officers Commanding Divisions and Districts in which cholera has recently occurred among the troops, are required to submit a special report (in duplicate) to the Quarter-Master General, for the information of His Excellency the Commander-in-Chief, showing, in detail, the number of cases, the class of persons attacked, and the number of each who have died; the general character of the disease, and whether any, and what, extra expense was caused to Government by movement into camp, &c.

61. In all cases where buildings have been evacuated on account of the appearance of cholera, a very careful record of the further progress of the epidemic among the individual body of men, women, and children who occupied each building so vacated should accompany the above report, prepared according to the following form:—

*Progress Report of Cholera at \_\_\_\_\_ in Her Majesty's \_\_\_\_\_ regiment, submitted in accordance with No. 61 of the Revised Rules regarding measures to be adopted on outbreak of cholera.*

STATIONS.	Corps.	Number or name of building.	Number and detail of occupants.	Date of first case.	Date of evacuation of building.	Number of cases before evacuation.	Number of cases among those occupants after evacuation.	Date of re-occupation.

Surgeon, }  
in charge. }

\_\_\_\_\_  
Commanding Regiment.

65. When tents are required for cholera or small-pox cases among the troops, the oldest and least serviceable must be selected, provided they are fit for the purpose.

66. In most cases the established proportion of camp equipage will be sufficient to accommodate that portion of the garrison which it may be necessary to move into camp. Extra camp equipage should, therefore, not be indented for unless the epidemic should prove severe, and render it probable that a larger proportion than half the garrison may have to be removed from cantonments. When the necessity for this has been admitted, commanding officers are to indent on the nearest magazine for such additional camp equipage as they may require; the indents to be countersigned by the Deputy Inspector-General of the Circle, or the senior Medical Officer on the spot, and by the Officer Commanding the Station.

67. The question of hospital management during the prevalence of cholera is one of urgent importance. No sanitary precaution must for a moment be neglected; no approach to anything like crowding must be permitted; all unimportant cases, the treatment of which in hospital is not essential, should be discharged; every case in hospital must be carefully watched; and it must be borne in mind that in very numerous instances it is in the hospital, among patients under treatment for other diseases, that cholera first appears. Precautionary measures in the hospitals must be commenced, whenever it may be possible, before the actual appearance of the disease; and as laid down in paragraph 5, all slight symptoms of disease must be treated in the barracks, or in observation wards entirely separate from the hospital.

68. If no separate building can be set apart as a temporary hospital, tents should be pitched for the purpose in some convenient place at a little distance. Every arrangement must be made, so that if a case of cholera should occur, it may be immediately removed there, and not be treated in the regular hospital. For the treatment of patients suffering from cholera, tents are unobjectionable at all seasons of the year. The air in a tent is less likely to become contaminated, and the ground can be changed as often as may be desirable. Medicines, and everything considered requisite for the treatment of the disease, should be prepared in the temporary hospital, and a portion of the establishment should be kept in readiness to be trans-

ferred there, so that if a case of cholera occurs, the means will exist for separate treatment, and subsequent communication with the regular hospital will be unnecessary.

69. If, in spite of every effort, the sub-division of hospital establishment should lead to difficulty in the medical treatment of the disease, this must be accepted as the lesser of two evils; for it must be always remembered that the main object during an epidemic of cholera is the prevention of fresh cases, much more than the treatment of those who have already been attacked; that prevention is often possible, but that treatment is almost useless after virulent symptoms have appeared.

70. No patient attacked by cholera should ever, under any circumstances, be placed in the same ward with patients suffering from other diseases. If a patient in hospital suffering from another disease be attacked with cholera, or if a case occur among the hospital attendants or others, the same system must be adopted as has been ordered in the event of cholera appearing in other buildings occupied by troops. The ward in which the case has shown itself must be immediately abandoned, and every precaution laid down with respect to other buildings must be taken.

71. During the prevalence of cholera funeral parties should be discontinued, and the band should not play at the burial either of officers or men.

72. Every effort should be made, during the actual treatment of the disease, to get rid, as completely as possible, of all the discharges from the sick or to render them innocuous. The vessels in which they are received should contain some powerful disinfectant; they should never be emptied into the usual receptacle, or carried to the common latrine, but taken away separately, and the contents thrown into a trench dug for the purpose and reserved for this use. A man should be constantly employed in the duty of throwing fresh earth over all filth the moment it is deposited, and all vessels should be thoroughly cleaned at the trench into which the filth is thrown.

73. During the prevalence of cholera at a station, such changes in the diet and such other medical comforts are to be allowed to the troops as the Deputy Inspector-General of the circle or other principal Medical Officer may deem expedient. In directing these comforts to



be freely supplied, particularly to the women and children, the senior Medical Officer on the spot will be required to exercise a wise discretion to avoid unnecessary expenditure, and to see that the indulgence is not abused.

74. On the occasion of an outbreak of cholera at a station, the entertainment of natives to attend European soldiers in hospital suffering from that disease is authorized to such an extent as the local Medical authorities may consider necessary,—the men being provided on requisition by the Commissariat Department.

75. When the employment of European soldiers as orderlies in hospitals during the prevalence of cholera is considered unavoidable, men will be selected, as far as possible, by volunteering in such numbers as the Medical authorities may deem necessary. The complete tour of duty shall in no case exceed 24 hours, and no man who is not in good health shall be thus employed. No orderly is to be kept in actual attendance in the hospital for a longer period than four hours at one time, nor is he to have a less interval of rest than six hours between successive tours of duty, whatever be the period of attendance in the ward. A room entirely separate from the hospital buildings must be provided for the accommodation of men relieved from attendance on the sick, in which they can remain until their tour of duty again comes round. Men not upon actual duty are not to be allowed to remain in the hospital. The strictest precautions must be taken to prevent men employed in the hospital from making use of the latrines, urinaries, or wash-houses used by the sick in hospital. The utmost care must be taken that the hands of all attendants on cholera patients be scrupulously cleaned by means of sand and water containing some disinfectant, or other thoroughly efficacious means; and that if the clothes of any of the men should become soiled by cholera discharges, they be at once taken off and thoroughly purified. Every man employed as a hospital orderly on attendance upon cholera patients is to be provided with tea or coffee before and after each tour of duty.

76. For attendance on women and children suffering from cholera, Native female nurses should, if possible, be procured.

77. Careful arrangements must be made for the removal of the sick from the barracks to the hospital, and on no account should the doolie employed for this purpose be made use of for the removal of the dead.

78. All bedding and clothing used by cholera patients which can be subjected to this process must be immediately purified by being boiled for quarter of an hour in water. There is no difficulty in boiling such articles as bed tape (newar), blanket, and linen. The bug-boilers offer facilities for boiling the cots. Rezaïs and other such articles which can never be thoroughly cleansed should be burned.

79. Cots and punkah-fringes which have been used by cholera patients, or in wards set apart for them, should be subjected, in a similar way, to the action of boiling water, when they are no longer required for such cases.

80. Tents used by cholera patients should be disinfected by one or other of the following gaseous disinfectants,—chlorine, nitrous acid, or sulphurous acid,—and subjected to the action of boiling water, then pitched and exposed to the action of sun and wind until thoroughly dried. The process of disinfection should be conducted before the return of the tents to cantonments if they have been used in camp; and if they have been used in cantonments, they should be taken to some out-of-the-way, but airy spot outside, to undergo the process of washing subsequent to fumigation, which should be done before the tents are struck, wherever they may have been standing when in use.

81. It will only be necessary to burn such articles as bedding, body linen, cots, puukah-fringes and tents when their thorough purification cannot be at once carried out in the manner above laid down, but with proper arrangements this destruction will rarely be required.

82. It is to be distinctly understood that the above rules are equally applicable to the women and children, if cholera should appear in their quarters, and that they are to be as strictly carried out; but endeavours should always be made to assign available buildings to them, so that the necessity of moving them into camp may, if possible, be avoided.

83. On the appearance of cholera or any other epidemic in the sudder or regimental bazaar of a station, arrangements should be made for the isolation and treatment of the cases. One or more grass huts should be placed on the outskirts of cantonments in a convenient and selected position, a fresh site being selected weekly, as the ground becomes contaminated and proves a source of danger. Stringent

orders should be issued to ensure all cases of the disease being sent to this isolated hospital for treatment.

84. The hospital for natives will be under the medical charge of the Station Staff Surgeon, or other Medical Officer selected by the Deputy Inspector-General of Hospitals, and the establishment, as per margin, to be increased if necessary, will be attached to it—the servants to be discharged on the subsidence of the epidemic.

1 Native Doctor.	
1 Compounder.	
1 Cook.	
1 Bheesty.	
2 Sweepers.	
1 Doolie with 4 bearers.	

85. When cantonment funds can be made available, without withdrawing them from such measures of conservancy as may be considered of even more importance, all expenses incurred by the establishment of these temporary hospitals, including the dieting of the patients, if that be also involved, should be defrayed by them, the primary object of such funds being to secure the proper sanitary condition of a station in every possible way.

86. As experience in such matters is of great value, a careful record should be preserved in the Brigade or Station Staff Office showing the number of cases occurring in each building, and the number of attacks in the different camps.

*Other points requiring the special attention of medical officers.*

87. In any epidemic, it is of the greatest importance to ascertain all the circumstances connected with the appearance of the first case, and a very careful investigation should be made at once in order to discover, if possible, whether it was due to importation. Such enquiries if delayed are usually unsatisfactory.

88. The condition of the camp-followers, of the punkah coolies, and others who come about the barracks, should receive attention, and orders should be issued that any suspicious cases occurring among them be reported, so that they may be at once investigated. With the assistance of the non-commissioned officers, such cases of sickness should not escape detection. Arrangements should be made for the early treatment of those attacked, either in camp or cantonments, and where the general cholera hospital for natives is distant, measures should be adopted for attending to their wants on the spot. A careful note of all such seizures, and of the circumstances under which they occur, should be preserved.



89. In the forms now adopted, the term “cholerae diarrhoea” has been abolished. All such cases distinguished by rice-water evacuations should be returned as cholera.

90. It is very desirable that the terms “sporadic” and “epidemic” should not be used in connection with reports of cases of cholera. There is no means of distinguishing between the two, and the exact significance of individual attacks can be known only when all the facts regarding the prevalence of the disease throughout the year have been ascertained and considered as a whole.

91. Cholera cases are not to be returned as “discharged” until all symptoms directly or indirectly due to the disease have disappeared.

92. When no cases of cholera have occurred for several days, an opinion is apt to prevail that the disease has disappeared, but it must be remembered that at certain seasons a lull is to be expected. This generally occurs in the early part of the monsoon. With regard to it no decided rule can yet be laid down, but it is important that the fact of there having been no cases for some time should not lead to any relaxation of the necessary precautions and preparations in anticipation of a further and generally more severe outbreak.

93. As it is important to ascertain the effect of upper stories in warding off attacks, a daily register in the annexed form should be kept :—

DATE.	Number occupying upper stories on that day.	Number of attacks in upper stories on that day.	Number occupying lower stories on that day.	Number of attacks in lower stories on that day.	*REMARKS.

\* In the remarks, the case of any man lately on guard, or particulars regarding other influences which may have caused the attack, should be noted.

*Responsibility of Commanding Officer.*

94. On the Officer Commanding the Station will devolve the responsibility of having all the directions contained in these rules, as regards the evacuation and purification of buildings, the movements into camp, and all other details carefully carried out.

95. These rules, founded on the general experience of the past, must be considered as the guide on all ordinary occasions. As in outbreaks of cholera, however, so much depends on the judgment and action of general and other officers, they must exercise their own discretion whenever extraordinary emergencies or unforeseen circumstances occur, and, in consultation with the senior medical officer, take upon themselves the responsibility of action incumbent on their position.

Whenever it may be considered advisable to deviate from the procedure prescribed in these rules, a special report explaining fully the reasons for so doing, must be forwarded to the Quarter-Master General, for the information of the Commander-in-Chief.

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## SECTION X.

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### COMMITTEES—MEDICAL BOARDS.

1. Medical officers are not in future to be nominated members of any Boards, except such as are purely professional or departmental.
- G. O. 239,  
25th September, 1868.

(a.)—Professional Boards to be considered all Medical Boards on officers or soldiers.

(b.)—Sanitary Boards, when matters influencing, or likely to influence, the health of the troops or community are concerned, and on which a medical opinion only is required.

(c.)—Boards for the examination of candidates for admission into the subordinate Medical Department.

Departmental Boards mean Boards on medicines or surgical equipment.

2. Such Boards to be composed of medical officers exclusively, and to consist of a president and two members, under all circumstances.
- Idem.*

3. Boards of Survey on hospital bedding, clothing, and utensils, on hospital diets and wines, although considered departmental, may, however, be composed of medical or military officers indifferently.

*Idem.*

4. Boards to examine as to the fitness or otherwise of soldiers for re-engagement, are purely professional. At stations where there are two or more regiments, these Boards should be presided over by a medical officer of a regiment other than that to which the soldier belongs. If, however, there be only one regiment at the station, the medical officers of the regiment should themselves constitute a Board, sign the re-engagement

certificate, and should, besides, furnish to the commanding officer a written statement detailing their opinion, as to the man's health, muscular development, age, &c.; and in case of rejection, a full explanation of their reasons: this statement they should all sign and attach to the re-engagement form.

This order applies only to men who may re-engage, with the consent of their commanding officer, after they have left their regiments for the port of embarkation. In the case of men re-engaging when present with their regiments, Medical Boards will only be held on doubtful cases.

5. Boards of Survey on barrack furniture, and soldiers' rations, should be composed of military officers exclusively; and if the opinion of a medical officer be required, one should be detailed to attend the Board (regimentally, or from the Brigade Office), who will give his opinion, either *vivâ voce* or in writing: this opinion, if in writing, to be attached to the proceedings of the Board.

6. The only exceptions to these rules to be in the case of Cantonment Committees, at which the principal medical officers of the British and Indian Forces will attend as members.

7. These rules will not affect the composition of Special Committees appointed by Government or the Commander-in-Chief.

8. When Committees are convened by Government, composed of military and medical officers, or of these and civilians also, the relative precedence of the members is to be that in which they are named in the order convening the Committee.

9. Committees on hospital equipment.

(a.)—Articles of hospital equipment, so unserviceable as to be incapable of repair, or of such trifling value as not to be worth the cost of carriage, should always, with concurrence of the Survey Committee, be made over to the nearest commissariat officer for disposal.

(b.)—All instruments of a delicate nature, for example, amputating instruments, &c., requiring repair, or sharpening, should be forwarded

direct to the Presidency Medical Store Depôt, Calcutta. Where practicable, the whole case of instruments need not be sent, but merely the article to be put in order.

(c.)—Repairable instruments of a blunt nature, for example, tooth instruments, should be forwarded to Provincial Depôt.

(d.)—Lists, in triplicate, of all articles forwarded for repair should invariably be sent to the medical store-keeper. The original and duplicate to be sent by post, the triplicate to be enclosed in the packing case.

G. O. C. C.  
3rd July, 1865.

10. Committees of Survey on bedding, miscellanies, &c.

(a.)—All articles of the above description considered unserviceable are to be presented in a clean, washed state to Committees of Survey, in view of being formally condemned. Committees should have the articles counted, and their numbers entered in the proper column—Repairable or unserviceable—of the form of Report.

Care should be taken that in counting clothing and bedding, pieces are not reckoned as whole articles.

(b.)—As a rule, all articles condemned as unserviceable should be made over to the Commissariat Department, but Committees may exercise a discretion in ordering to be destroyed such miscellanies as, from wear and tear, are of no value, and such clothing and bedding as cannot, by reason of their fabric, or from their torn and tattered state, be used in cleaning rifles. Committees should also clearly understand that they have the power to order condemned articles of clothing (even fit to be used in cleaning rifles) to be destroyed in special cases, such as the recent prevalence of any infectious disease, or other similar grounds.

(c.)—The manner in which the several articles have been dealt with should be noted in the Survey Report:

(d.)—The reports of Committees should be in the forms prescribed in the Commissariat Department, *viz.*, 3 A. for miscellanies, and 4 A. for clothing and bedding.

11.—(a.) Medical Committees (with a passed Interpreter attending,) shall assemble, on the 15th April, and on the 15th October, to examine, and report upon, such candidates as may offer themselves for apprenticeships in the subordinate Medical Department.



(b.)—Descriptive rolls of candidates, prepared in their own handwriting, and accompanied with the necessary certificates of parentage and age, together with satisfactory testimonials of character, are to be furnished at least ten days before the examinations take place; these are to be forwarded by the surgeon, to the administrative medical officer of the circle, who will cause rolls of candidates to be prepared, for the purpose of these being laid, with the other documents, before the Committee.

(c.)—Candidates must be of healthy constitution, physically fit for the active duties of the Service, and between 14 and 18 years of age.

(d.)—Candidates must be prepared to undergo an examination respecting their knowledge of the English language generally, including orthography, the meaning of words, writing from dictation, simple arithmetic as far as the rule of three, and a colloquial knowledge of Hindoostanee.

12. In future, the proceedings, in duplicate, of local Committees for the examination of candidates for admission to the subordinate Medical Department, shall, previous to the attestation of the candidates, be transmitted by the President, *direct*, to the Inspector-General of Hospitals, Indian Medical Department, who will forward the proceedings to Army Head-Quarters.

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## SECTION XI.

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### CONSERVANCY.

1. *Of Camps.*—With a view to preserving the conservancy of camps and encamping grounds, the Commander-in-Chief directs that the system should be adopted in camps as has been laid down in recent orders for Military Cantonments, the main principle of which is daily burial of all refuse matter.

G. O. C. C.  
14th November, 1862.

(a.)—It is therefore to be observed as a standing order among all European troops, moving in course of relief, or otherwise, that two trenches, each two feet deep, two feet wide, and fifty feet long, are to be dug by the regimental bildars, at a distance of 120 yards from the outward flanks of the camp, *i. e.*, in echellon; but should the nature of the ground prevent their location according to this rule, the same principle for their location is to be observed, *i. e.*, they are not on any account to be directly in front or rear of the camp, but in echellon, on their flanks, being so placed that the prevailing wind is not to carry the effluvia to the camp: these trenches are never to be in such proximity to wells as to make percolation to the water possible.

(b.)—These trenches are to be thoroughly filled with earth before the rear guard quits the ground.

2. *Carts.*—The issue of an unguent is sanctioned, composed of two parts grease, and one part tar, for the axles of conservancy carts, in the proportion of 8 oz. for each pair of wheels, monthly.

G. O. C. C.  
14th May, 1864.

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## SECTION XII.

### CONVALESCENT HILL DEPOTS.

Applications for appointments to—See Section III.

Staff pay, for charge of—See Section XLII.

1. No regimental surgeon can hold one of these appointments.

Mily. Regulations, 1851,  
Section xix, page 103.

2. No medical officer can hold medical charge of a hill station for a period exceeding two years.

G. O. 274 of 16th Nov-  
ember, 1867. G. O. 317,  
31st December, 1867.

3. The names of medical subordinates who are recommended for duty at one of these Depôts should be sent departmentally to the Inspector-General of Hospitals, British Forces.

4. The number of men to be sent annually to the Depôts will be

Mily. Regulations,  
Section xix, page 103.

regulated by Officers Commanding Divisions, under instructions which will be communicated by the Quarter-Master General of the Army.

5. Non-commissioned officers and soldiers sent to the Convales-

Idem.

cent Depôts, on account of their health, are, when not actually in hospital, to be considered as “out-patients,” subject to such restraint as the medical officer in charge may consider it necessary to impose upon them.

G. O. 28th March, 1861.

6. Convalescents for Hill Depôts are of two classes :

(a.)—Those whose health actually requires change.

(b.)—Those whom it may be considered desirable to send to the hills.

NOTE.—Cases of malformation of the chest, affections of the head,

Mily. Regulations, 1857,  
Chapter xlii, para. 15.

organic affections of the heart, rheumatism, and incurable strumous disorders, should not be sent.

7. Under no circumstances are men who have been one season at a Convalescent Depôt to be allowed to remain a second year in the hills, save on the recommendation of the usual Medical Board.

G. O. 142,  
16th July, 1866.

8. It is inexpedient to detain at Convalescent Depôts during the winter months, men who have not been restored to health by the first year's residence in the hills.

Departmental Circular  
No. 8, 8th September, 1869.

It is most desirable that such men should be invalided to England.

9. The undermentioned dates are fixed for the movements, under divisional arrangements, of convalescents and recovered men, to and from the several Hill Sanitaria.

Nynee Tal,  
Landour,  
Kussowlie,  
Bagsoo,  
Darjeeling,  
Murree,

} On such dates as will ensure arrival before the  
15th April.

Ditto before 12th March.

Ditto before 20th April.

The 15th November is the earliest date for despatching recovered men to the plains from the several Depôts, excepting Darjeeling, for which the 15th December is fixed.

10. Medical officers holding charges should be prepared to send at the end of each year to the Deputy Inspector-General, or Superintending Staff Surgeon-Major of their respective circles, a return of the number of men (noting married and single separately,) whom they desire to recommend to be sent to the hills.

It is important when preparing this to take into consideration the state of health of the different families in the regiment or corps.

11. The annexed form of nominal return of men proceeding to Convalescent Depôts, made out on demi-royal paper, must be filled in by commanding and medical officers of corps and batteries, and sent in, in duplicate, with the men.

G. O. 55,  
22nd March, 1870.

At the end of the season, one copy completed by the medical officer in charge of the Depôt will be returned to the regiment or battery concerned, and one copy will be retained at the Depôt.

N. B.—The first six columns will be filled in, in the orderly room.



ORIGINAL.

Roll of Invalids \_\_\_\_\_ Regiment,

at \_\_\_\_\_

Information to be given carefully, and not more than twelve names entered on one sheet of paper.

To be sent in duplicate.

One copy to be retained at Depôt, and the other returned to the Regiment at the end of season.

12. A nominal roll, each corps separately, of such of the Invalids for the season, from the station, as are unable to carry their arms, must be sent by the president, along with the rolls noted in para. 11, to the Brigade Major or Station Staff Officer, for transmission to the Officer Commanding the Corps to which the men belong.

13. (a.)—It is the duty of the medical officer who is ordered to proceed in medical charge of convalescents for Hill Depôts, to make all the necessary arrangements for the supply of the undermentioned, for the use of these convalescents:—

Hospital Tents.

Hospital Clothing.

Hospital Cooking Pots.

2nd Class Hospital Establishment.

Medicines.

Instruments.

Carriage for the above, and for the sick of the party.

(b.)—Convalescents from different stations usually join the main body of men en-route for the hills.

Should the medical officer in charge not arrive in time to make the necessary arrangements for the sick of any of these detachments, this should be done under the supervision of the senior medical officer of the station, in communication with the Deputy Inspector-General of Hospitals of the circle.

14. If a regimental officer is sent on duty to a Convalescent Depôt on account of the state of his health, a brief statement of his case should be sent to the medical officer in charge of that Depôt.

15. The rule laid down in para. 14 regarding certain officers, applies equally to the case of medical subordinates similarly circumstanced. With regard to such subordinates, the instructions contained in Section <sup>L1</sup>41, para. 31, must not be omitted.

16. In the case of men whom it is proposed to invalid from a Convalescent Depôt, the instructions contained in Section XXXVI., para. 13, &c., must be strictly attended to.

17. The names of men at any Depôt who have passed the Medical Invaliding Committee, are to be sent, without any delay, by the Depôt medical officer, to the medical officer in charge of the corps to which the men belong: this return should also record the disease for which each man named in it has been invalided, as also the recommendation of the Medical Board, in each case, whether for "Discharge" or "Change."

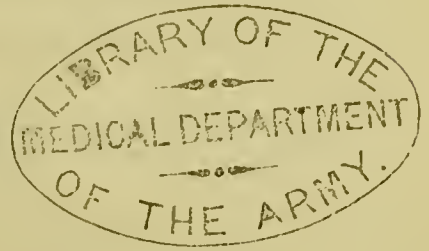
18. In order to enable medical officers to complete their annual sick returns by the insertion of the cases of men absent at Convalescent Depôts, medical officers in charge of these Depôts should, at the termination of each man's case, transmit a medical certificate (W. O. Form, page 155, Medical Regulations), giving particulars of the disease to the surgeon of the corps to which the man belongs.

19. Full particulars should, at the end of each year, be sent to regimental medical officers, by medical officers in charge of Convalescent Depôts, respecting those men, of their corps, who may be remaining at the Depôt at the termination of the year.

Departmental Circular  
<sup>226</sup>  
 M.O., Statistical, 26th  
 September, 1865.

Departmental Circular  
<sup>2</sup>  
 M.O., 31st January, 1866.





## SECTION XIII.

## CORRESPONDENCE.

1. Fly docket—*i. e.*, a quarter sheet of foolscap paper doubled down in the centre—are unauthorized either for original correspondence with head-quarters, or for the remarks of the transmitting authorities.

Adjutant-General's Circular 44, 15th July, 1869.

2. Form of docketing letters for Army Head-Quarters :—

G. O. 33,  
30th January, 1868.

Year.

Dated

Received

Writer } Colonel  
          } Commanding Regiment.

Station

Reference (Quote the order or letter referring to this subject.)

Subject (Concise view of the subject of the letter.)

Enclosures. Number of, or Headings.

3. Form of docketing official departmental documents :—

Departmental Circular,  
9th March, 1863.

Year.

No.

Date

Name of writer

Station

Despatched

Subject

4. No letter should refer to more than one subject.

Adjutant-General's  
Circular Memo. 17, 24th  
March, 1870.

5. The undermentioned being "Privileged  
Offices," official letters directed to any of them  
should not be stamped :—

Inspector-General of Hospitals.

Deputy Inspector-General of Hospitals.

Superintending Staff Surgeon-Major.

Principal Medical Store-keeper.

Examiner of Medical Accounts.

All other official communications sent by post must bear service stamps in addition.

6. Service stamps are obtained by the surgeon by requisition on the officer Commanding. A statement of the manner in which these stamps have been expended should be sent in monthly, or whenever called for by the officer commanding—on Bengal Form No. 175.



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## SECTION XIV.

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### DRILL.

1. In carrying out the instructions, for Drill in the hot weather, commanding officers should always consult medical officers in regard of the hour.  
Adjutant-General's Circular 53G., 22nd March, 1865.
  2. Great gun Drill should always take place early in the morning, should never during the hot season exceed half an hour, and must be performed under cover. The half hour's Drill is not to be performed if the percentage of sick in the regiment is high, or the surgeon of the regiment considers it unadvisable in the interests of the men's health.  
G. O. 15th July, 1862.
  3. Gymnasia, Drills and Instruction. Running Drill will be limited to the morning parades, and to the cold season, *viz.*, between the 15th November and the 15th March.  
G. O., 62, 14th March, 1867.
- Men over 15 years' service, and weakly men if considered unfit by the medical officer, are to be excused, more particularly at the commencement of the cold season, when many of the men have lately passed through the hospitals, owing to malarious disease.
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## SECTION XV.

## EPIDEMICS.

*Epidemics of Small-pox.*

1. Whenever a case of small-pox appears, it should be immediately isolated, and all communication between the sick person and others, whether direct or indirect, should as far as possible be prevented.

G. O. 193.,  
Section v., 3rd August,  
1870.

2. In some cantonments, a building no longer required for other purposes, and occupying an unfrequented site, has been set apart for the reception of small-pox cases, and wherever such a building is available, the ease should be at once removed to it.

Idem.

3. In those cantonments where no such building exists, the ease must be removed either to a tent or to a grass hut.

4. As eases are most apt to occur during the hot months, a grass hut is in every way better suited for the purpose than a tent. If lined on the sides with a coating of mud, it affords very good protection.

Idem.

5. If, owing to the small number of sick in hospital, or to other circumstances, a ward or other room, well separated from the other patients, or other persons, can be made available for the temporary reception of the ease, there is no objection to its being treated there during the first day or two of the disease when the eruption is still advancing, and its power of spreading to a distance is comparatively limited. Time will thus be allowed for the preparation of a grass hut.

Idem.

6. If this course should have been followed, the room temporarily occupied by the ease should be immediately purified in the manner described in Rule 32, regarding cholera (Section IX).

Idem.

7. Whether a tent or a grass hut is employed, it should be pitched in some secluded spot, and the shelter of trees, if possible, secured.
- Idem.
8. If a tent is used, the oldest and least serviceable should be selected.
- Idem.
9. Good tents should never be employed for the purpose, except in very exceptional cases, which should in each case be explained.
- Idem.
10. Unless there is an immediate prospect of their being further required, tents or huts used by small-pox patients should be destroyed by fire, in presence of a responsible person, as soon as vacated.
- Idem.
11. If there is an immediate prospect of the tent or hut being again required, it should be purified in the manner described as suitable for buildings in Rule 32, for cholera. It should then be left standing, with the sides and doors kept closely shut down.
- Idem.
12. Bedding and clothing, coats and punkahs, should be thoroughly disinfected as described in Nos. 78, 79, and 81, for cholera.
- Idem.
12. In the case of soldiers who have died of cholera, small-pox, or other contagious disease, only such articles, the property of the deceased, as were in actual use at the time of his sickness, should be destroyed, and these only when, in the opinion of the medical officer, this may be necessary.

Adjutant-General's Circular 71E, 1st May, 1865.

## SECTION XVI.

## FIRES.

1. The burning in Government quarters at night of any lights not adequately protected, or in places where the contiguity of anything likely to ignite readily, and from which any danger may be apprehended is strictly prohibited.

G. O. C. C.  
15th March, 1865.

2. In the event of a chimney catching fire, the fuel should be removed from the grate, and extinguished as rapidly as possible, at the same time padding, such as *Rezais*, or other bedding should be at once applied to the bottom of the flue, to check the draught up it; some means should also be tried to close up the top of the flue.

G. O. 206,  
24th September, 1866.

3 (a.)—Earthen pots for holding water in case of fire, should be supplied for all public buildings having thatched roofs, by the Barraek Department.

P. W. Code,  
Section iv., G. 29.

(b.)—Where tanks for this purpose have been constructed, and buckets have superseded water-pots, the buckets are to be suspended on ropes in the verandah nearest the water tanks.

Idem, G. 33.

## SECTION XVII.

## FIREWOOD.

1. In all ordinary circumstances, when the number of patients in hospital is 12 or more, the allowance of firewood is restricted to 4lbs. per man, per diem.  
G. O. 135,  
10th July, 1866.
2. In cases where the number of patients is less than 12, or where the firewood supplied is not tolerably dry and good, 5lbs. per diem may be allowed, or even 6lbs., if necessary : but the cause which renders the increase necessary must be certified by the medical officer at the time.  
Idem.
3. In the case of outbreaks of epidemic disease, or other extraordinary circumstances, no fixed limit can be either assigned or observed, but in such cases, the principal medical officer will certify to the necessity of the extra expenditure incurred.  
Idem.
4. The dimensions for firewood for use in barracks and hospital chimnies are to be determined by the Officer Commanding the Corps by which required, subject to the approval, when the commissariat officer may consider such necessary, of the Officer Commanding the Station.  
Idem.
5. Pieces of firewood exceeding 18 inches in length are not to be received from the Commissariat Department, their use in Government buildings being strictly prohibited.  
Idem.
6. The Divisions and Districts in certain stations of which fuel is allowed, are :—  
E. Frontier Brigade ... Roehileund District.  
Mcerut Division ... Sirhind Division.  
Lahore Division ... Peshawur Division.

G. O. 135,  
10th July, 1866.

G. O. 116,  
30th May, 1867.

G. O. 66,  
8th March, 1869.

Roorkee Hospital and Barracks; in the case of  
Barracks, between 1st December and 15th Feb.

G. O. 270,  
14th September, 1869.

Jutogh Hospital, R. A.

G. O. 93,  
4th May, 1870.

Bareilly Hospital.

G. O. 114,  
20th May, 1870.

Bagsoo—Durmsalla—Dalhousie.

7. Fuel is authorized to apothecaries doing duty at hill stations,  
and at stations in the plains where it is provided

G. O. 160,  
27th July, 1866.

for the European troops, at the rate of 20 seers

per diem in winter, and 10 in summer.



## SECTION XVIII.

## GARDENS.

1. Encouragement is given, and assistance afforded to soldiers who desire to cultivate Gardens, and for this purpose allotments of ground have been made. "Several of the military hospitals have good and prettily laid out Gardens. His Excellency particularly observed those at Peshawur, Sealcote, Mean Meer, and Allahabad." Extract from G. O. C. C., 9th April, 1864.

G. O. C.,  
5th July, 1864,  
Paras. 27, 28.

2. Gardening implements are supplied agreeably to the following proportions :—

Hoes 5, Watcring Pots 4,	} Per troop or company, or in that proportion to the number of men using them.
Rakes 3, Wheel-barrow,	
Spades 24,	

Tools are provided through the Barrack Master.

3. Committees assemble to determine the articles that should be taken from the soldiers' Gardens, each month of the year, and to fix the price to be paid for the vegetables. These committees are to be composed as under :—

Head-Quarter Stations ...	} Deputy Inspector-General of Hospitals or senior medical officer, executive commissariat officer, a field officer or Captain.

At out-posts	} A field officer or Captain, an officer in charge of a troop or company, a medical officer.
...	

## SECTION XIX.

## HEARSEES.

G. O.,  
29th May, 1861.

1. Hearsees are allowed to European troops on the following scale :—

For each Regiment of European Cavalry or Infantry ... 1 Hearse.

For a Wing                   ,,                   ,,                   ,, detached ... 1 Hearse.

For detachments of one or two companies or troops at out-posts, special doolies, as now, are to be used and not Hearsees.

For Artillery, Horse or Foot in any situation, Hearsees are not allowed, as a limber is considered not only a convenient, but an appropriate substitute for a Hearsee, and is to be used instead when available, otherwise a special dooley as for detachments of Infantry.

For European depôts of strength equal to a wing, one Hearsee; of less strength, doolies as above.

2. These Hearsees will be attached to regiments or detachments, as part of barrack furniture, and their repairs

G. O.,  
29th May, 1861.

will be arranged for by the Ordnance Department, on the requisition of Barrack Masters.

3. A burial dooley, painted and hung with black, is sanctioned for hill stations, instead of the hearsees authorized for the plains.

G. O. C. C.  
29th June, 1865.

## SECTION XX.

## OF HOSPITALS IN GENERAL.

1. A guard is to be constantly furnished for every hospital from the corps to which it belongs, and the surgeon or assistant surgeon will signify to the commanding officer of the regiment or battalion the particular orders which he wishes to be given to the non-commissioned officer commanding the guard and the sentries.

Medical Regulations, 1851.  
Chap. ix., para. 7.

2. When a soldier is sent to hospital, his arms and accoutrements are to be left with his troop or company, and in no instance is he to take his arms with him to the hospital.

Idem, para. 8.

3. In cantonments or barracks, the quarters of medical staff of corps must be as near to the hospital of their respective corps as may be practicable, and in camp, their tents are to be pitched as close to the hospital tents, as circumstances of ground, and the situation of camp, will admit.

Idem, para. 10.

4. The utmost attention is to be invariably paid to cleanliness in and around all hospitals in every situation. The Quarter-Master's establishment of corps respectively are to be employed, as often as may be necessary, to keep the ground adjacent to the hospitals free from weeds, to fill up all excavations, and to prevent any water from remaining on the ground, in the vicinity of hospitals.

Idem, para. 13.

5. From the 1st March to the 1st October, medical officers will make the morning visit to their hospitals by  $\frac{1}{2}$  past 6 o'clock; and not later than  $\frac{1}{2}$  past 7 o'clock, from the 1st October to the 1st March, except in these cases, when it can be satisfactorily shewn that their attendance at the hours specified was absolutely necessary elsewhere on public duty.

Idem, para. 15.

6. Medical officers being engaged in their hospital duties in the morning, are not required to attend on parade, the monthly muster of the corps to

Idem, para. 16.

which they belong. In muster rolls, they will be returned "present on duty."

7. His Royal Highness the Commander-in-Chief has decided that every medical officer is as much bound to be present on his place on parade, when the corps to which he belongs is inspected by a general officer, as any combatant officer; if his special duties are such, as to compel him, for the benefit of the public service, to absent himself on such occasions, he should make a point of applying beforehand to his commanding officer, to have his attendance dispensed with, in order that his absence may be duly accounted for.

Departmental Circular  
8th September, 1863.

8. The sick in hospital are not to be permitted to leave the hospital without special leave of the surgeon.

Medical Regulations, 1851,  
Chap. ix., para. 15.

9. The sick of the sappers and miners will be admitted into hospitals of European corps, serving at the same station, but will be attended by their own surgeons, the preference to be given to the hospital of the European artillery, should one happen to be at the station.

Idem, para. 10.

10. The hospitals of small detachments proceeding on the march, will be supplied from the corps to which they belong with hospital tents, medicines, instruments, &c.

11. Permanent hanging punkahs will be provided by the barrack department for European hospitals, and the necessary establishment of coolies entertained, for this, and watering tatties, by the Commissariat Department, during the proper season of the year.

Medical Regulations, 1851,  
Chap. ix., para. 21.

12. Female hospitals.

Hospital accommodation for 10 per cent. of the full complement of wives allowed by the regulations to reside in barracks, is sanctioned at all stations for the Artillery, and at the stations of Morar, Sangor, Delhi, Agra, and Peshawar, for British Cavalry and Infantry, and 8 per cent. for full complement at all other stations, for British Cavalry and Infantry; one half as much in addition for the accommodation of children.

Departmental Circular  
8th April, 1869.

13. Extra Hospital accommodation—See Section XLV., para. 5.

## SECTION XXI.

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### HOSPITAL—CONVEYANCE OF MEDICAL AND HOSPITAL STORES.

1. The following is the description and quantity of carriage allowed for a Regiment of Dragoons, a Battalion of Artillery, a Brigade of Horse Artillery, and a Regiment of Infantry :—

Bengal Medical Regulations, 1851, Chap. xviii.

2 Camels.		1 Hackery.		1 Banghywalla.
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Idem.

2. For smaller detachments, carriage will be allowed in similar proportions.

For a party equal to half a battalion in strength, and above 100, one camel and one banghywalla allowed.

Idem.

3. For detachments under the strength of a company, one banghywalla.

4. The above paragraphs do not include conveyance for hospital clothing, which is arranged for by the Commissariat.

Idem.

5. The camels for the conveyance of the medical and hospital stores to form part of the regular establishment.

6. For the purpose above specified, camels are generally to be preferred, and are to be furnished according to the extent that may be practicable at the time; but in parts of the country where camels are not procurable, carts, bullocks, yaboos, or mules will be substituted in just proportion, the medicine chests to be altered accordingly at the Depôts, or by the Commissariat Department.

7. Transport for the Camel Trunks, noted in Section XXV., Hospital Miscellanies, is authorized to be entertained on the following scale :—



One camel for each pair of Camel Trunks—(total, 7 pairs to a regiment).

(a.)—Carriage for Hospital Tents.—See Section “Tents.”

8. Whenever a corps shall be ordered on the march, indents will be prepared by the surgeon, for the requisite carriage of Europe and bazaar medicines, and medical stores of every description, agreeably to the above scale.

These indents in duplicate (Carriage, Form No. 8, extra Carriage, Form No. 8 A) must be countersigned by the administrative medical officer of the circle.

9. A review certificate (No. 8C, duplicate) is required by the Commissariat for all carriage paid by that Department.

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## SECTION XXII.

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### HOSPITAL—CONVEYANCE OF SICK OF EUROPEAN TROOPS.

The proportion of doolies for European troops in the field, on the march, in cantonments, and in garrison, is as follows :—

- |  |   |                          |   |             |
|--|---|--------------------------|---|-------------|
| Medical Regulations, 1851,<br>Chap. xix., para. 1. | 1. In the field for }<br>every description of }<br>European troops ... }  | for every }<br>10 men. } | { | one dooley. |
| Idem.  | 2. When marching from station to }<br>station, on ordinary }<br>occasions of relief, the }<br>sick being left behind or sent by water ... } | for every }<br>20 men. } | { | one dooley. |

3. (a.)—In the field, 1 sirdar and 2 mates for every 100 bearers, and 6 bearers for each dooley. The mates, however, are not to be exempted from the performance of the usual duties of common bearers when on the line of march.

(b.)—The same rules apply to troops on the march on occasions of relief.

4. (a.)—Indents for carriage are made on Form 8, in duplicate.

(b.)—Indents for extra carriage are made on Form 8A, in duplicate.

(c.)—Both these indents must bear the countersignature of the Deputy Inspector-General of Hospitals of the circle.

5. A Nominal Roll (Form 8B, in duplicate,) of those men for whom extra carriage is required, must accompany indents for the same.

6. A Division, District, Station, or on the march Regimental or Detachment Order is required (as an authority for the entertainment of extra carriage,) by the Commissariat Department.

7. In cantonments, one dooley is allowed to every four bearers, (including mate), according to the scale of bearers laid down in Section XXIII., for Regiments, &c.

Medical Regulations, 1851,  
Chap. xix. 8. An additional dooley, with bearers, is allowed to each brigade or battery of artillery during the practising season.

Idem. 9. One dooley is allowed for the Sanitary Depôts at Landour and Darjeeling, &c.

10. An additional dooley, with bearers, will be allowed for each detachment of a regiment, consisting of not less than one troop or company, when separated from regimental head-quarters.

G. O.  
14th January, 1867.

When a regiment is divided into wings, one of the two doolies authorized will be attached to each wing.

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SECTION XXIII.

HOSPITAL ESTABLISHMENTS.

1. The Monthly Muster of Hospital Establishments will, for the future, be included with the usual Muster Rolls of respective Corps.
2. The different Establishments sanctioned are as follows:—

	Rate of Monthly Pay.	For a Regiment of Infantry.	For a Regiment of Cavalry, or Battalion of Foot Artillery.	For a Brigade of Horse Artillery, or a Detachment exceeding half a Regiment or half a Battery of Artillery.	For a Battery of Horse Artillery.	For a Field Battery of Artillery, or a Mountain Train Battery.	For a Detachment of more than one Troop or Company, but not exceeding half a Regiment.	For a Detachment consisting of 24 men, and upwards, but not exceeding a Troop or Company.	
	Rs.								
Apothecary ...	} ...	See Section "Sub. Med. Dept."							
Assistant Apothecary ...									
Passed Hospital Apprentice ...									
Hospital Apprentice ...									
Nurse ...	15	} See Section "Hospital Nurse."							
Assistant Nurse ...	8								
Writer ...	10	1	1	1	...	...	.....	.....	See also Section XXXIII. *Compounder and Dresser in one person.
Head Compounder ...	10	1	1	.....	...	...	.....	.....	
Compounder ...	8	1	1	1	1	1	.....	*1	
Head Dresser ...	8	1	1	.....	...	...	.....	.....	
Dresser ...	6	1	1	1	1	1	.....	.....	
Shop Coolies ...	5	2	2	2	1	1	.....	1	
Barber ...	6	1	1	1	One	when	required	.....	
Head Cook ...	6	1	1	1	...	...	.....	.....	
Cooks ...	5	4	3	2	2	2	.....	1	
Head Bhistie ...	6	1	1	1	...	...	.....	.....	
Bhisties ...	5	6	4	3	2	2	.....	2	
Head Sweeper ...	6	1	1	1	...	...	.....	.....	
Sweepers ...	4	8	6	4	2	2	.....	2	
Sirdar Coolie ...	6	1	1	1	1	1	.....	1	
Coolies ...	4	20	12	10	4	4	.....	4	
Female Sweeper ...	4	1	1	1	1	1	.....	.....	
Mate Dooley-bearer ...	5	1	1	1	1	1	.....	.....	
Dooley-bearers ...	4	7	7	7	3	3	.....	3	
Conservancy Cart and Driver ...	15	2	2	2	1	†	.....	†	

† 2 Sweepers in lieu of Cart.

G. O. 203,  
6th August, 1870.

(a.)—Establishment of hospital servants for detachments of invalids, &c., proceeding to Kurra-  
chee by Indus route :—

1 Compounder.	1 Bhistie.
1 Dresser.	2 Washermen.
2 Cooks.	2 Sweepers.

The attendance upon the sick to be entrusted to time-expired men, and those invalided for reasons which only affect their military efficiency.

3. In all cases where there is only one native compounder or dresser employed with detachments of European troops, he will draw the pay of head compounder.

Medical Regulations, 1851,  
Chap. xv., para. 8.

4. (a.)—Indents for hospital servants according to the prescribed scale are made out on Form No. 6, duplicate.

(b.)—Indents for “extra” hospital servants on Form 6A, duplicate. A statement of the circumstances which necessitate the employment of extra hospital servants, must accompany this indent when forwarding it for the countersignature of the Deputy Inspector-General of Hospitals of the circle.

5. Payment of these servants.—See Section 1, paragraphs 4, 5, 6, 7, and 8.

6. The following arrangements for the transfer of establishments, &c., on regiments moving on relief, are ordered :—

G. O. 155,  
25th June, 1870.

(a.)—When a regiment proceeding to England is relieved by another regiment direct from England or from another Presidency, the regimental establishments—*viz.*, Quarter-Masters, hospital and bazaar establishments—paid by Government are to be kept on pay, and transferred to the relieving regiment, on its arrival.

(b.)—In the event of a regiment coming by route march, and not by rail, from another Presidency, the establishments belonging to that Presidency should be returned as soon as possible for the use of the regiment arriving in relief, either from England or from another Presidency.

(c.)—When regiments without relief, or when relieved by corps having establishments, proceed by railway direct for embarkation for England, or for transfer to another Presidency, all native establish-

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ments, except such hospital servants as may be absolutely necessary for the care of the sick, are to be left behind, a detailed report of such being made to the Quarter-Master General at Army Head-Quarters, for instructions regarding their disposal.

(*d.*)—All establishments left behind under the terms of this order, are to be attached to the Commissariat Department, and are to be duly provided with last pay certificates, as well as the record, and register of service ordered in Section XXXII., Article 3, of the Bengal Military Regulations.

7. Whenever the extra labour and services of native establishments call for special recognition during a cholera epidemic, commanding officers will submit a full report of the same, through the divisional authorities, to His Excellency, for the consideration of the Government of India, as soon after the outbreak as possible.

Adjutant-General's Circular 65, 17th June, 1868.

These recommendations are to be made only when the epidemic is exceptionally severe, and protracted, and when the work is well done.

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## SECTION XXIV.

## HOSPITAL CLOTHING AND BEDDING—REVISED LIST OF.

Names of Articles of Clothing and Bedding in charge of Purveyor.	For a Regiment of European Cavalry, Infantry, or for 100 Sick.
Banians, Flannel ... ..	200
Gowns, Linen, Double ... ..	200
Gowns, Linen, Single ... ..	200
Gowns, Bed, lined with <i>Louie</i> , for Hospitals at Peshawur, Rawul-pindee, &c., and Hill Stations ... ..	100
Shirts, Linen ... ..	400
Socks, Linen or Cotton ... ..	200
Socks, Worsted ... ..	200
Trowsers, Linen... ..	200
Trowsers, Flannel ... ..	200
BEDDING.	
Bed-side Suttrinejees ... ..	100
Blankets, Country, lined with Chintz ... ..	100
Blankets, English ... ..	50
Cloth, <i>Kharwah</i> , for repairs ... ..	As required.
Mattresses ... ..	100
Pillows, Large ... ..	100
Pillows, Small ... ..	200
Pillows, Soft ... ..	25
Pillow Cases, Large ... ..	200
Pillow Cases, Small ... ..	400
Quilts, Cotton ... ..	100
Sheets, Linen ... ..	400
Slippers, Pairs ... ..	100
Table Cloths ... ..	25
Towels, Patna, Hand ... ..	200
Thread, Sewing ... ..	As required.

2. Articles of Clothing, Bedding, &c., according to the authorized Purveyors' Regulations, 1870, scale, must be kept in charge of the Purveyor, and given out for use, on daily or frequent indents from the medical officer, and these indents must be receipted by the medical officer, on being complied with by the Purveyor.



3. Purveyors are directly responsible to commissariat officers for all articles in store, but they have no further concern with articles once issued to medical officers, unless they are returned; but when returned into store, they will be again credited in the Purveyor's accounts, and receipts granted to the medical officer.

FORM OF RECEIPT.

ARTICLES.	CONDITION.			REMARKS.
	S.	R.	U.	
				<p><i>N. B.</i>—Under this rule, articles requiring repair or to be washed will be returned by Medical Officers to the Purveyor, with a requisition for fresh articles. The returned articles will be washed or repaired by the Purveyor, and credited in his accounts.</p> <p><i>Note.</i>—This form of receipt will be in duplicate, one copy to be held by the Medical Officer and one by the Purveyor; the latter to bear the signature of the Medical Officer, certifying to condition of articles returned.</p>

4. Any discrepancies between issue and return to Purveyors by medical officers, to be at once represented by the Purveyor to the medical officer, due allowance being made for fair wear and tear.

5. The executive commissariat officer will, half-yearly, inspect the stock of Clothing in charge of the Purveyor, and any articles considered unserviceable will be submitted to a Board of Survey, composed of medical officers, if possible. One medical officer must be present under any circumstances.

Committees on Clothing.—See Section X., para. 10, &c.

6. New Clothing must be surveyed at the commissariat godown before being made over to the Purveyor. The medical officer of the regiment to which the Purveyor belongs, if available, should be a member of the committee that surveys the Clothing, and the Purveyor should also be in attendance on the committee. The Clothing should then, in the presence of the committee, be stamped.

7. In the case of a corps leaving the Presidency for Europe, or marching in course of relief, and not requiring to take the whole of its Clothing, Bedding, &c., a committee of medical officers (if not practi-

Departmental Circular  
22  
70, 27th May, 1870.

cable, a mixed committee) is to assemble to report on what is required to be left. Articles pronounced serviceable will be taken charge of by the Commissariat, for re-issue on the first opportunity; condemned articles are to be disposed of as laid down in Section X., para. 10.

8. For the dress of each patient, a bed-gown, made of stout chintz, and those for the cold season to be lined with good Gurrah cloth, a linen sheet, a cap, a pair of long drawers, and a pair of common slippers, with a banian and a pair of long drawers of *loui*, or flannel for the cold weather, or whenever the surgeon deems it necessary.

Medical Regulations,  
1851, Chap. xiv., para. 2.

9. The Bedding is to consist of one mattress, one large and two small pillows, (the mattresses and pillows being all stuffed with sunn, or country hemp,) with two sheets, one country blanket, or two if necessary. A chintz covering, to be stitched over one side of one blanket, for every patient; and the chintz and blankets, in each ward, to be of the same pattern, or as nearly so as possible.

Idem, para. 3.

10. Extra articles to be issued when necessary.

11. Every patient to be furnished with a clean shirt every second morning, and clean sheets, bed-gown, cap, and long drawers, twice a week.

Medical Regulations,  
1851, Chap. xiv., para. 4.

The surgeon, however, will order changes of bed-linen and clothing at any intermediate time, when really necessary.

12. Patients in hospital must make good every article of clothing which they wantonly damage or destroy.

Idem, para. 26.

13. When articles are lost or damaged, and not at once replaced, the surgeon will report the same to the officer commanding, who will assemble a court of enquiry, composed of three experienced medical officers, or when there may not be a sufficient number available, the committee shall be a mixed one, of military and medical officers of experience.

Idem, para. 21.

14. Courts of enquiry thus constituted will consider it their duty, as far as possible, to ascertain, and record in their proceedings, the number of articles

Idem, para. 22.

missing or damaged, the manner in which the deficiency or damage has occurred, and to give their opinion as to who is liable to make good the deficiency or damage.

15. Clothing or Bedding used by cholera or small-pox patients—  
See Sections IX. and XV.

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*Hospital Miscellanies—Revised List.—(Continued.)*

NAMES OF ARTICLES.	For a Regiment of European Cavalry, Infantry, or for 100 Sick.
Scales and Weights from 10lbs. downwards ... ..	1 set.
Soup Ladles ... ..	2
Spoons, Iron ... ..	100
Sullectahs ... ..	As required.
Tape, Broad ... ..	100
Tin Caps ... ..	100
Tin Funnels ... ..	3
Tin Plates ... ..	100
Tin Pots ... ..	100
Tin Spittoons ... ..	25
Tea-Pots ... ..	As required.
Tin Salt Castors (on the march) ... ..	100
Tin Bed-head Tickets... ..	100
Trays for Dressing ... ..	2
Trays for Medicines ... ..	2

2. Articles required for use in hospitals in cantonments and on the march, are obtained from the Purveyor on requisition.

3. The same rules regarding responsibility for charge of, damage to, and courts of enquiry regarding, any of the above-mentioned articles are in force, as are laid down in the case of Clothing, Bedding, &c., Section XXIV.

## SECTION XXVI.

## HOSPITAL NECESSARIES.

NAMES OF ARTICLES.	QUANTITIES ALLOWED FOR ONE MONTH.			
	European Regiment 1,000 strong.	A Wing of European Regiment of 500 and under 1,000.	A Detachment of 250 and under 500.	A Detachment of 50 or any number under 250.
Arrowroot ... ..	As required.			
Baskets ... ..	No. 2	2	1	1
Bazar Phials... ..	Doz. 2	1	1	1
Bladders ... ..	No. 4	2	2	2
Blankets, Country, for Fomenting ... ..	" 2	1	1	1
Bottles, empty, quarts ... ..	" 16	8	4	2
Bottles, empty, pints ... ..	" 12	6	3	3
Brandy ... ..	Pts. As required.			
Brooms ... ..	No. 6	4	2	2
Candles, Wax ... ..	Lbs. 2	1	1	1
Carrots for Poultices ... ..	As required.			
Charcoal ... ..	Lbs. 40	20	10	5
Chatties ... ..	As required.			
Chunam for conservancy purposes ... ..	As required.			
Chunam for Dispensary purposes ... ..	6	3	2	1
Cloth, Doosooty sheets for Ice ... ..	Yds. As required.			
Cloth, Long, Fine ... ..	" As required.			
Cloth, Country, for Bandages ... ..	" 30	15	10	5
Cloth, Country, for Dressing ... ..	" 20	10	5	2½
Corks ... ..	No. 12	8	6	6
Cotton for Burns ... ..	Oz. 8	4	2	1
Cow-dung ... ..	As required.			
Flannel, Europeo ... ..	Yds. 8	4	2	1
Gurrahs ... ..	As required.			
Gumlahs ... ..	As required.			
Green Silk for Eye-shades ... ..	As required.			
Honey ... ..	Lbs. 1	6 oz.	4 oz.	4 oz.
Jallahs ... ..	As required.			
Lamp Thread ... ..	As required.			
Leeches ... ..	No. 3,000	1,500	500	200
Limes for Drink ... ..	As required.			
Linseed ... ..	Lbs. 10	6	4	2
Linseed Meal ... ..	" 10	5	2	1
Marking Nuts ... ..	As required.			



*Hospital Necessaries.*—(Continued.)

NAMES OF ARTICLES.					QUANTITIES ALLOWED FOR ONE MONTH.					
					European Regiment 1,000 strong.	A Wing of European Regiment of 500 and under 1,000.	A Detachment of 250 and under 500.	A Detachment of 50 or any number under 250.		
Moomjamahs	...	...	...	Yds.	As required.					
Musliu	...	...	...	„	As required.					
Naunds	...	...	...	No.	As required.					
Needles	...	...	...	„	2	1	1	1		
Oil for Dispensary	...	...	...	Lbs.	20	10	5	2		
Oil for Lamps	...	...	...	...	Proportionate to the No. of Wards.					
Plantain Leaves	...	...	...	Doz.	8	4	2	1		
Pots and Pans	...	...	...	„	3	1½	No. 9	No. 6		
Poultice Materials	...	Bran	...	...	}	As required.				
										Bread
										Rice for Flour
										Flour
Sago	...	...	...	Lbs.	As required.					
Suet, Mutton	...	...	...	„	5	2½	1½	8 oz.		
Soap, Country	...	...	...	„	6	3	2	1		
Soap, Europe, Cakes	...	...	...	No.	1	1	1	...		
Soorahees	...	...	...	„	As required.					
Spirits	...	...	...	Bts.	4	2	1	Pint 1		
Straw	...	...	...	...	As required.					
Sugar	...	...	...	Lbs.	5	2	1	8 oz.		
Tape, Country	...	...	...	Yds.	30	15	10	5		
Tinning	...	...	...	...	As required.					
Tow	...	...	...	Lbs.	6	7	3	1		
Twine	...	...	...	Oz.	8	4	2	1		
Wax-Cloth	...	...	...	Yds.	6	3	2	1		
Wood, Fire	...	...	...	Mds.	6	3	2	1		
Wine, Port	...	...	...	...	As required.					

NOTE.—These articles which are sanctioned, medical officers are given to understand, are not to be indented for in full monthly unless required; and they are never to be exceeded, except with the permission of the Deputy Inspector-General of Hospitals, upon full explanation.



SECTION XXVIII.

HOSPITAL SUPPLIES, &c.  
*Revised List of Bazar Medicines.*

ARTICLES IN ALPHABETICAL ORDER.	QUANTITIES ALLOWED FOR ONE MONTH.							
	European Regiment 1,000 strong.		A Wing of European Regiment of 500 and under 1,000.		A Detachment of 250 and under 500.		A Detachment of 50 or any number under 250.	
	lbs.	oz.	lbs.	oz.	lbs.	oz.	lbs.	oz.
Alum ... ..	2	.....	1	.....	..	8	.....	4
Assafœtida ... ..	.....	2	.....	1	.....	1	.....	½
Bael Fruit ... ..	As required.							
Camphor ... ..	1	.....	.....	8	.....	4	.....	2
Coriander Seeds ... ..	.....	2	.....	1	.....	1	.....	1
Ginger, Dry ... ..	.....	8	.....	6	.....	4	.....	2
Gembaberoza ... ..	As required.							
Kaladana ... ..	⅓rds of Kaladana and ⅓rd Jalap; e. g., of quantity of Jallap allowed.							
Kuth, Catechu ... ..	.....	4	.....	2	.....	.....	.....	.....
Linseed Oil ... ..	3	.....	1	8	.....	12	.....	8
Mustard Seed ... ..	3	.....	1	8	.....	12	.....	8
Mustard Oil ... ..	3	.....	1	8	.....	12	.....	8
Mustard, Europe ... ..	2	.....	1	.....	.....	12	.....	8
Orange Peel ... ..	1	.....	.....	8	.....	4	.....	4
Pepper, Black ... ..	As required for medical purposes.							
Pomegranate Root ... ..	As required for special purposes.							
Poppy Head ... ..	No. 50		No. 25		No. 20		No. 12.	
Rasout ... ..	.....	2	.....	1	.....	.....	.....	.....
Sulphur, Country ... ..	2	.....	1	.....	.....	8	.....	8
Vinegar ... ..	3	.....	1	8	Pint.		Pint.	
Wax, White ... ..	4	.....	2	.....	1	8	1	.....

These articles which are sanctioned, medical officers are given to understand, are not to be indented for in full monthly unless required ; and they are never to be exceeded, except with the permission of the Deputy Inspector-General of Hospitals upon full explanation.

## SECTION XXIX.

## HOSPITAL FURNITURE.

REVISED FORM NO. 148, CHAP. XXI, SEC. V., PARA. 20.

*List of Hospital Furniture to be issued by the Barrack Department.*

LETTER.	ARTICLES.	AUTHORIZED SCALE.										REMARKS.
		CAVALRY, STRENGTH, 461.		INFANTRY, STRENGTH, 861.		BATTERY, ROYAL ARTIL- LERY, 145.		WING OF INFAN- TRY OR DIVISION OF ARTILLERY.		NATIVE TROOPS.		
		Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Cavalry.	Infantry.	
A	Almirahs ... ..	3	1	4	1	1	1	2	1	1	1	Where feasible, cupboards in the walls with sliding shelves and folding doors are to be substituted for almirahs, the former being inexpensive and convenient.
B	Basins, metal ... ..	25	6	43	9	7	2	16	4	4	4	Where glazed earthenware ones are not procurable. Three metal ones to each European Hospital where earthenware basins are procurable.
	Basin stands... ..	5	6	13	9	3	2	10	4	1	1	
	Bath, Foot ... ..	2	1	2	1	1	1	2	1	...	...	
	Bath, Hip ... ..	3	...	4	...	1	...	2	...	...	...	
	Bath, Slipper ... ..	2	1	2	1	1	1	2	1	...	...	
	Bath, Shower ... ..	1	...	1	...	1	...	1	...	...	...	The provision of shower baths is to be left to special medical requisitions.
	Book-cases ... ..	1	...	1	...	1	...	1	...	...	...	
	Bamboo brooms with long handles	Two per Hospital.										
	Biers ... ..	1	...	1	...	1	...	1	...	...	...	
	Bucket ... ..	1	...	1	...	1	...	1	...	...	...	
C	Carts, filth, privy ... ..	2	...	2	...	1	...	1	...	1	1	For the dead-house. In addition to the Regimental carts.
	Chairs, Easy ... ..	9	4	15	6	3	1	8	3	...	...	
	Chairs, Office ... ..	3	...	4	...	1	...	*	...	1	1	* Two office chairs are allowed for each Wing of Infantry, and one chair is allowed for every Assistant Surgeon attached to a Royal Artillery Division, as well as one for the Assistant Surgeon in charge.

REVISED FORM No. 148.—(Continued.)

LETTER.	ARTICLES.	AUTHORIZED SCALE.										REMARKS.			
		CAVALRY. STRENGTH, 461.		INFANTRY. STRENGTH, 861.		BATTERY, ROYAL ARTIL- LERY, 145.		WING OF INFAN- TRY, OR DIVISION OF ARTILLERY.		NATIVE TROOPS.					
		Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Cavalry.	Infantry.				
C	Chairs, Night ...	12	...	16	...	3	...	8	...	...	...	...	...	To be used when on the line of march.	
	Chairs, light or folding ...	2	...	2	...	2	...	2	...	1	1	...	...		
	Charpoys ...	...	...	...	...	...	...	...	...	25	57	...	...		
	Chimnies, glass burn- ers ...	As required. One per lamp in use.										...	...		
	Chimnies, Kerosene Lamp ...	One per lamp in use ... ..										...	...		
	Chicks, fine ...	One to each opening inside verandah										...	...		
	Chicks, coarse ...	Ditto ditto outer verandah										...	...		
	Chopping blocks, small ...	One per cook-house.										...	...		
	Close stools, with pan	9	3	15	5	3	1	8	3	...	...	...	...		None for Native Troops. For children.
	Close stools, small ...	...	1	...	1	...	1	...	1	...	...	...			
	Cots ...	73	12	125	19	20	3	50	10	...	...	...	...		
	Cots for fracture ...	7	2	8	3	2	1	5	2	4	2	...	...		
	Cupboards ...	One per cook-house ... ..										...	...		
D	Diet boards, 25 by 20 inches square ...	One per each ward.										...	...		
F	Filter stands ...	To be determined by Standing Medical Committee.										...	...		
	Forms with backs ...	12	4	19	6	2	1	10	2	...	...	...	...		
G	Gratings ...	Two per wash-house ... ..										...	...		
H	Head rests ...	1	...	1	...	1	...	1	...	...	...	...	...	Depends on length of hasin-stand in wash- house.	
I	Inventory hoard ...	One per building, ward, or room.										...	...		
	Ice boxes ...	1	...	1	...	1	...	1	...	...	...	...	...		
J	Jhamps ...	One per outer opening in verandah, if required.										...	...		
L	Lamp-rods... ..	One per hanging lamp.										...	...		
	Lamp-ladders ...	1	...	1	...	1	...	1	...	...	...	...	...		
	Lamp, square ...	...	...	...	...	...	...	...	...	One for each ward.	...	...	...		
	Lamps, Kerosene, &c.	...	...	...	...	...	...	...	...	...	...	...	...		
	Lanterns ...	...	...	...	...	...	...	...	...	One for each ward.	...	...	...		
M	Meat-safes ...	2	...	2	...	1	...	1	...	...	...	...	...		Two for the Hospital of a Division of Royal Artillery equal to a Cavalry Regiment.
	Medicine Trays ...	1	1	1	1	1	1	1	1	1	1	...	...		
P	Padlocks and Keys ...	One per hasp, if required.										...	...		
	Privy pans, iron ...	One to each seat.										...	...		
	Punkah fringes ...	One to each punkah.										...	...		
	Punkah canes ...	According to requirements.										...	...		
	Purdahs ...	As many as may be considered absolutely neces- sary for inner-doors and openings.										...	...		
	Receptacles ...	Two per Hospital Cook-house ... ..										...	...		
	Receptacles ...	Two per Hospital privy ... ..										...	...		
	Receptacles ...	One per Hospital Urinary ... ..										...	...		
S	Salt-cellars, plain, China ...	One hundred for the Hospital of a full Regiment of British Infantry, and in proportion, viz., 9 per cent., for Hospitals of other branches of the Service.										...	...		

See note (a) page 77.

Only sanctioned when the doors and windows of a Hospital are not well appointed or close fitting.

To be painted white. Four small receptacles per privy at Hill Stations.

Two small receptacles per privy at Hill Stations.



REVISED FORM No. 148.—(Concluded.)

LETTER.	ARTICLES.	AUTHORIZED SCALE.										REMARKS.
		CAVALRY. STRENGTH, 461.		INFANTRY. STRENGTH, 861.		BATTERY, ROYAL ARTIL- LERY, 145.		WING OF INFAN- TRY, OR DIVISION OF ARTILLERY.		NATIVE TROOPS.		
		Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Cavalry.	Infantry.	
S	Stoves ... ..	One will be allowed for a small ward, to be set apart for special cases when considered necessary by the Medical Officers and the Deputy Inspector-General of Hospitals of the Circle.										In a Regiment of Infantry or Cavalry, a stove for a second ward may be granted on the same conditions.
T	Screens ... ..	2	...	2	...	2	...	2	...	...	...	
	Stools, 2' high ...	One per cook-house.										
	Tables, for patients, 10' x 3' ...	5	2	8	3	2	1	4	2	...	...	
	Tables, Convalescent or Bed-ridden ...	6	2	10	4	2	1	5	2	...	...	
	Tables, Prescribing...	3	...	3	1	2	...	2	...	...	...	
	Tables, Dispensary ...	2	...	2	...	2	...	2	...	1	1	
	Tables, Bedside ...	67	10	115	15	18	1	45	8	...	...	
	Tables, Office ...	1	...	1	...	1	...	*	...	1	1	
	Tables, cook-house, 3' x 2' ...	Three per cook-house.										
	Tables, Dissecting ...	1	...	1	...	1	...	1	...	...	...	For the dead-house.
	Tables, small, for writing ...	1	...	1	...	1	...	1	...	...	...	For the dead-house.
	Table ... ..	1	...	1	...	1	...	1	...	...	...	For the dead-house. This table is to be of the same size as the dissecting table, but of ordinary construction, for use in the event of there being more than one body in the dead-house.
	Table, Camp, small...	1	...	1	...	1	...	1	...	1	1	To be used when on the line of march.
	Ticket Frames ...	88	12	145	19	23	3	70	10	25	57	
	Towel Racks ...	6	2	10	3	2	1	5	2	...	...	The numbers herein entered to be considered the maximum. Racks to be supplied only to the extent found really necessary in each case.
	Trays for kerosine lamp ...	One per 5 lamps in use.										
	Trestles ... ..	According to requirements.										
	Trestles for supporting a coffin ...	6	...	6	...	4	...	6	...	...	...	For the dead-house.
	Tubs, half casks ...	Three per wash-house. ...										For holding water for washing.
U	Tubs, bathing ...	2	...	2	...	1	...	1	...	1	1	
	Urinals ... ..	To be determined by Standing Medical Committee.										None for Native Troops. Glazed earthen-ware ones to be used where procurable.
W	Washing Stand ...	1	...	1	...	1	...	1	...	...	...	For the dead-house.

NOTE. (a.)—Scale of kerosene and common oil lamps allowed for European Hospitals.

*Entire Night.*

*Till Tattoo.*

KEROSENE OIL	{	1 Lamp per ward or separate room occupied by patients... 1 Lamp per surgery ...	}	Kerosene Oil	{	1 Lamp per 12 patients. 1 Reading Lamp.
COMMON OIL	{	1 Lamp per passage to privy. 1 Lamp per privy. 1 Lamp per cook-room if specially required by the Medical Officer.	}			

Also one hand lamp, common oil, per separate hospital.

Kerosine Lamps. Renewals, 2 per cent. per mensem on the number in use.

Glass Burners. Renewals, 5 per cent. per mensem on the number in use.

Quarter-Master General's Circular No. 32 B. B.K. Department, 23rd June, 1869.

Quantity of Kerosene Oil allowed per lamp nightly :—

Large lamps,  $4\frac{3}{4}$  to  $5\frac{1}{2}$  oz.  
Small lamps, 4 to  $4\frac{3}{4}$  oz.

One gallon of oil contains 128 fluid ounces.

G. O. 17,  
24th January, 1870.

(b.)—Iron conservancy vessels are not to be heated in future when doonah is applied.

When coal tar is available, and cheaper than doonah, it is to be used, and applied cold.

The time-expired charcoal of the Filters will be found amply sufficient for the purpose of heating the doonah.

(c.)—Urinals. Glazed earthenware urinals are sanctioned at certain stations where they can be obtained at a reasonable cost. These are to be used on a raised platform, 1'3" high, and with a width of 1'6" to 2'. The platform to be made of pueka brick set in mud. On the top will be spread a layer of earth one inch in depth.

(d.)—The following additions are to be made to the Barrack Department revised form No. 148 :—

Quarter-Master General's Circular No. 36 B. B.K. Department, 16th August, 1870.

Chicks { One to each door and window of Hospital Cook-rooms, British Troops.

Quarter-Master General's Circular 30 B. B.K. Department, 8th July, 1870.

(e.)—The following will also be added :—

Perforated covers for filter stands ... { One per filter stand, to be placed on the lowest gurrah.

Renewals, 20 per cent. per mensem on the number issued.

(f.)—Sand used in gurrachs should be carefully washed, and cleared of all impurities, previous to deposit as a filtering medium, and in all cases should be well rammed down in the second gurrach up to the brim, and not half filled as formerly: while the ehareoal should be frequently dried, and its deodorizing properties occasionally tested by the Medical Authorities.

Quarter-Master General's Circular <sup>31.B.</sup><sub>B. K.</sub> Department, 13th July, 1870. (g.)—A width between the arms of 20 inches is sanctioned with reference to the revised standard plan of easy chairs for use in Hospitals.

G. O. 28, 25th January, 1869. 2. The following articles of camp furniture are sanctioned for Hospitals of Batteries, of Royal Artillery, and of Regiments, when on the line of march:—

Batteries of Royal Artillery ...	{	1 small camp table.
	}	2 light or folding chairs.
Regiments, European Cavalry		Ditto.
„ „ Infantry		Ditto.
Native Cavalry ... ..	{	1 small camp table.
	}	1 light or folding chair.

These articles are to be supplied on indent, through the Barrack Department, Barrack Masters taking medical officers' receipts for the same. Medical officers are to include the table and chairs in the return of Government Stores prepared and submitted by them.

P. W. Code revised form 147, Chapter xxi., Section V., para. 20, and G. G. O. 877, 15th September, 1868. 3. Furniture authorized to be supplied by the Barrack Department for medical subordinates of all grades:—

Boxes, with padlock and key ...	{	2 Per married Medical Subordinate.	Furniture is only to be issued to Medical Subordinates when they occupy rooms in Barracks or Government Quarters.
	}	1 Per unmarried Medical Subordinate.	
Chairs, Barrack ...		2 Per Medical Subordinate.	
Cots ...	{	2 Per married Medical Subordinate.	
	}	1 Per unmarried Medical Subordinate.	
Tables, small, 5' x 2''-10'' ...		1 Per Medical Subordinate.	

4. When receiving over Hospital Furniture from the Barrack Department, on arrival at a station, any observations regarding the condition, &c., of the articles made over, is invariably to be recorded in writing by the officer deputed to receive the authorized articles: these remarks, countersigned by the officer commanding, with such others as he may feel inclined to record, are to be forwarded, through the regular channel, to the Quarter-Master General.

G. O. 48,  
15th March, 1870.

If this rule is neglected, no after-representations regarding the state of the furniture at the time it was handed over, will be accepted as a plea for the partial remittance of any charges for Barrack damages, which may be subsequently preferred by the Barrack Department.

5. When buildings are handed over by Barrack Masters to corps, an inventory, in duplicate, of the building with fixtures, *viz.*, doors, windows, panes of glass, bolts, locks, hinges, jhamps, pegs, racks, punkahs, and furniture, shewing the condition of each building, and the condition and cost of each article, signed with the name and office of the Barrack Master, shall be delivered to the Quarter-Master, who, after investigation, having signed the same, will return the original, and retain the duplicate for his own use.

P. W. Code, Chap. xxi.,  
Section IV., para. 9.

6. In all cases of movements of entire regiments or batteries into camps for sickness, or any other cause, the Quarter-Master, or other officer deputed by the commanding officer, should invariably hand over and get receipts for the furniture, from the Barrack Master, whose responsibility commences from that time.

G. O. 80,  
25th April, 1870.

7. When any article of Hospital Furniture is considered by the surgeon to be in such a state, from fair wear, as to necessitate its being exchanged, this is done by requisition of the Barrack Master, receipts being given and received for the damaged article and for that supplied in its stead.

8. In the case of any damage being caused to barrack or hospital buildings, or their fixtures, through carelessness or wilful destruction on the part of the occupants, the Barrack Master shall at

P. W. Code, Chap. xxi.,  
Section IV., paras. 15, 16.



once submit a requisition to the Executive Engineer for its repair. The work shall be executed by him without delay, and a bill for its cost submitted to the Barrack Master, for adjustment by the Regiment. If the liability to pay or the amount of the bill be questioned, an appeal will be made to the Officer Commanding the Station, who will order a Court of Enquiry to assemble on the spot. If the Officer Commanding the Station, on the evidence laid before him, considers the charge made should be borne by the corps appealing, he will issue instructions accordingly; but if he considers that any remission should be made, he will forward the proceedings of the Court to the Quarter-Master General, for the consideration of the Commander-in-Chief.

9. Hospital Furniture is supplied by the Commissariat Department, through the Barrack Department.—Form No. 3 B., triplicate. Indents for this and for new Hospital Furniture (Form 3 B.) require the countersignature of the Deputy Inspector-General of Hospitals of the circle.

P. W. Code, Chap. xxi.,  
Section V., para. 18.  
Idem, para. 48.

10. (a.)—Indents on the Barrack Department for supplies not allowed by regulations, nor included in the departmental estimates, must be accompanied by an extract of the Station or Division Order directing the issue of the stores, in which case the responsibility rests with the officer issuing the order.

P. W. Code, Chap. xxi.,  
Section V., para. 8.

(b.)—Under no circumstances can the budget allotment for Hospital Furniture at *any one station be exceeded* by any authority short of that of the Government of India.

Quarter-Master General's  
Circular 50B., 5th  
October, 1869.

11. Any deviation from the standard plans in constructing articles of Hospital Furniture, or from the prescribed procedure of submission of indents, entails personal pecuniary responsibility on the part of the officer ordering the articles.

Quarter-Master General's  
Circular 28 B. Department,  
B.K.,  
5th July, 1870.

12. Washing tape of soldiers' coats is considered as repair of furniture.

P. W. Code, Chap. xxi.,  
Section V., para. 47.  
Idem, para. 27.

Requisitions for petty repairs of Furniture,  
Form 7.



## SECTION XXX.

## HOSPITAL NURSES.

1. A nurse, on a salary of Rs. 15 a month, is allowed for each  
G. O. C. C. Regiment of British Cavalry or Infantry, with  
23rd November, 1865. an assistant nurse, on Rs. 8 a month, to aid her  
when the number of patients exceeds ten.
2. When the Regiment is divided into wings, the nurse remains  
Idem. with the head-quarter wing, and an assistant  
nurse is allowed to the detached wing, if the  
families accompany it.
3. For a permanent convalescent depôt, or a detachment equal  
Idem. in strength to two or more troops of Cavalry or  
companies of Infantry, when the families are  
with it, an assistant nurse is allowed, in lieu of the ayah formerly  
maintained.
4. For a detachment of less strength, an assistant nurse may be  
Idem. temporarily engaged on the same rate of salary  
(Rs. 8 a month), when, and for as long as is  
necessary, the necessity being explained in each case.
5. A nurse, with an assistant, may be allowed to the head-  
Idem. quarters of a Brigade of Royal Artillery, when  
not less than two complete Batteries are present  
with it, as to a Regiment of Cavalry.
6. An assistant nurse to Batteries or Detachments of Artillery,  
Idem. equalling in strength two troops of Cavalry  
or companies of Infantry, when the families  
accompany it. An assistant nurse temporarily to Detachments of less  
strength than two troops or companies, as in Detachments of Cavalry  
or Infantry.

7. These salaries are to be in addition to their subsistence allowance from Government, if the nurses employed are soldiers' wives.

G. O. C. C.  
4th February, 1864.

Idem.

Each nurse will be allowed a pint of Beer daily, in addition to pay, &c.

Government letter 27 of  
1864.

1½ anna per diem.

G. O. C. C.  
23rd November, 1865.

Should the nurse prefer compensation in lieu of Beer, she is allowed this at the rate of

8. The following rules<sup>7</sup> regarding the regimental nurses are to be strictly observed :—

(a.)—The regimental hospital nurse shall be a woman of known good character, and be selected from among the soldiers' wives, by the surgeon in medical charge, with the concurrence of the officer commanding, and shall, in all matters relating to Hospital Duty, be solely under the orders of the former.

(b.)—The nurse shall always attend the medical officer on his visits, and shall superintend, generally, the administration of medicines and medical comforts to the women and children sick in hospital, especially to helpless patients, reporting any irregularity in this respect to the medical officer.

(c.)—She shall be held responsible for the personal cleanliness of the patients, and for their obedience to the orders of the medical officer as to keeping their beds in position.

She shall see that the hospital and its furniture are properly cleaned, and shall be answerable for its ventilation generally.

(d.)—In case of neglect or disobedience on the part of the servants, or any breach of discipline, or the use of improper language, on the part of any patient, she shall report the same to the medical officer on his next visit.

(e.)—Nurses shall not ask or accept of presents, either in money or kind, from patients, or friends of patients, either during their illness, or after their death, recovery, or departure.

(f.)—Nurses shall receive visitors only at such times as shall be laid down by the medical officer.

(g.)—If any nurse be found guilty of excess, or of gross misconduct, she shall be at once suspended from duty by the medical officer,

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and reported to the commanding officer ; her pay ceasing from the date of her suspension. The sanction of the latter shall be requisite for actual dismissal, and no nurse so dismissed for misconduct shall be re-employed in that capacity.

(h.)—The above rules shall apply generally to assistant nurses.

The assistants being subordinate to the nurse, when there are two, but having their more special duties assigned them by the medical officer.

9. Female Hospital. Section XX., para. 12.

Tents for Female Hospital and for Nurse. Section LIII., paras. 5, 6.

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## SECTION XXXI.

## HOSPITAL SERGEANT.

1. The following rates of pay and allowances for Regimental Hospital Sergeants of Brigades of Royal Artillery and Regiments of European Cavalry and Infantry serving in India, in assimilation with the principle of remuneration to the corresponding grade in the British Army:—

G. G. O. 445,  
1870.

	PAY DURING FIRST PERIOD OF SERVICE.						PAY DURING SECOND TERM OF SERVICE.																	
	FOR A MONTH OF						FOR A MONTH OF																	
	28 Days.		29 Days.		30 Days.		31 Days.		28 Days.		29 Days.		30 Days.		31 Days.									
	Rs.	As.	P.	Rs.	As.	P.	Rs.	As.	P.	Rs.	As.	P.	Rs.	As.	P.	Rs.	As.	P.						
<b>HOSE ARTILLERY.</b>																								
Under 7 years' service	38	13	9	40	3	11	41	10	1	43	0	4	40	0	0	41	6	10	42	13	8	44	4	7
After " "	45	11	6	47	5	7	48	15	8	50	9	10	46	13	9	48	8	6	50	3	3	51	14	1
<b>FIELD AND GARRISON ARTILLERY.</b>																								
Under 7 years' service	36	9	2	37	14	1	39	2	11	40	7	10	37	11	5	39	1	0	40	6	6	41	12	1
After " "	43	6	11	44	15	9	46	8	6	48	1	4	44	9	2	46	2	8	47	12	1	49	5	7
<b>EUROPEAN CAVALRY.</b>																								
Under 7 years' service	29	2	7	30	2	2	31	1	6	32	1	0	30	4	10	31	5	1	32	5	1	33	5	3
After " "	36	0	4	37	3	10	38	7	1	39	10	6	37	2	7	38	6	9	39	10	8	40	14	9
<b>EUROPEAN INFANTRY.</b>																								
Under 7 years' service	27	9	7	28	9	0	29	8	3	30	7	7	28	11	10	29	11	11	30	11	10	31	11	10
After " "	34	7	4	35	10	8	36	13	10	38	1	1	35	9	7	36	13	7	38	1	5	39	5	4

2. In addition to the above rates of pay, Regimental Hospital Sergeants on the effective establishment of a hospital, shall receive for each day they may be so employed, a hospital diet and two annas and seven pies in addition, the latter being the equivalent of the deduction for the ordinary ration, less beer money.

3. When a hospital diet cannot be supplied, five annas and three pies in lieu, being the equivalent of 8d. per diem, will be allowed, and in such cases Regimental Hospital Sergeants may elect either to receive a free ordinary ration, or the two annas and seven pies per diem as above authorized.

4. When absent from a hospital, the claim to a hospital diet, or the equivalent of 8d. per diem, will cease, but the absentee will be entitled to a ration, or the amount of the deduction made from his pay as the value of his ration, *viz.*, three annas and four pies per diem.

5. An Acting Hospital Sergeant will receive the hospital diet, or its equivalent of five annas and three pies, as also the daily allowance of two annas and seven pies on account of the deduction made for ration, less beer money, in addition to the pay of his grade.

6. The Hospital Sergeant receives his pay through his company; his ration money is recovered by the surgeon from the Paymaster. See Section I., para. 11.

7. The appointment of a Hospital Sergeant to the Headquarters of a Garrison Brigade of Royal Artillery in India, is sanctioned.  
G. O. 228,  
15th October, 1866.

8. A non-effective Hospital Sergeant is sanctioned, on the usual allowance of Rs. 7-8 a month, to all Batteries of Royal Artillery in India, for the purpose of making out the medical returns of the Battery, and keeping up the medical accounts.  
G. O. 25,  
25th January, 1868.

9. The commanding officer of every Regiment and Battery is at liberty, should he desire it, to submit to the Adjutant-General's Office, at Simla, with the approval of General Officers Commanding Divisions, the name of one non-commissioned officer, whom he considers specially deserving, and



whom he can confidently recommend, for the appointment of Hospital Sergeant at a Convalescent Depôt.

Letter dated 15th September, 1870, (Claim, 3463 of 1870), from Pay Examiner to Pay-master, 103rd Fusiliers.

10. The allowance for rations is not sanctioned in the case of a Hospital Sergeant with a detached wing of a regiment.

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## SECTION XXXII.

HOSPITAL SERVANTS ON BOARD TROOP-SHIPS TO AND  
FROM ENGLAND.

1. All claims for wages for hospital servants employed on board vessels for conveying troops to this country (England) from abroad, will in future be settled by the Principal Purveyor at the Royal Victoria Hospital, Netley. Such claim will accordingly be transmitted to the officer in question for adjustment.

G. O. 334, 2nd November, 1868.

2. The claims will be prepared on W. O. Form No. 172. And the name, rank of each person, and the nature and period of employment, carefully entered, whether he belonged to the permanent hospital staff or not.

3. The following information to be sent in with the above :

(a.)—A certificate from the medical officer in charge that the servants were actually and necessarily employed in attendance on sick soldiers, an additional certificate being added in the case of special orderlies (in conformity with the rule laid down in the Purveyors' Regulations), when the orderlies exceed 10 per cent. of the sick in hospital.

(b.)—A certificate from the officer commanding that the men did not receive free rations during the voyage.

(c.)—A certificate from the medical officer showing the average number of sick daily under treatment and in hospital during the voyage.

4. In a case of a voyage from England, the claim will, on termination of the voyage, be submitted by the medical officer in charge, for the approval of the principal medical officer at the foreign station, who will, if he approves forward it to the General or other Officer Commanding, to authorize the issue of the amount due.

The same information as would be required for the adjustment of claims at Netley, will be furnished with the claims at foreign stations.

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## SECTION XXXIII.

### HOSPITAL WRITERS.

1. The appointment of European non-commissioned officers and soldiers is sanctioned as hospital writers instead of natives, on a salary of Rs. 10 per mensem in addition to their pay, &c.

G. O. C. C.,  
30th July, 1863.

A hospital writer is allowed to the head-quarters of each brigade of artillery irrespective of the number of batteries present with it.

2. Unless there should be no European non-commissioned officer or soldier, willing to do the work, or to whose employment in it there is no objection, the employment in it of natives, on Rs. 35 a month, as hospital writers in European corps, should be discontinued; those now employed, however, being allowed to remain till they are discharged on pension.

G. O. C. C.,  
23rd September, 1863.

3. A hospital writer is sanctioned, on a salary of Rs. 10 per mensem, for each of the following Convalescent Depôts:—

G. O. 120,  
2nd April, 1868.  
G. O., 134,  
8th June, 1870.

Kussowlie.	Nynee Tal.	Murree.
Darjeeling.	Landour.	Dalhousie.



## SECTION XXXIV.

## HOSPITAL FOR NATIVES.

1. A small Hospital, adjacent to the British soldiers' Hospital, has been authorized to be provided for the reception of severe cases of sickness, or accident, among the native establishments attached to British troops, on the following scale :—

G. O. C. C. 12th December, 1864.	For a Regiment of Dragoons, or Division of Artillery consisting of more than two Batteries of Field Artillery	... ..	}	For 30 men.
	For a Battery of Horse Artillery, one or two Batteries of Artillery, or a Regiment of British Infantry	... ..	}	For 15 men.

These Hospitals will be used as dispensaries where men requiring treatment, but not very seriously ill, can attend to receive medicine.

2. Common string-bottom cots are authorized to be provided by the Commissariat Department, on the indent of the Medical Department, at the rate of one cot per man, according to the above scale.

## SECTION XXXV.

## INSANES—EPILEPTICS.

1. Unless in exceptional cases, and under some special necessity, it is most desirable to restrict the despatch of lunatics from regiments to the invaliding season.

Departmental Circular  
 $\frac{13}{68}$ , 14th April, 1868.

2. In the case of men invalided for mental diseases, the medical history should contain the information required by "Medical Regulations," pages 106, 107.

3. With reference to Horse Guards' G. O. No. 68 of 1868, made applicable to India by Adjutant-General's Circular No. 98 of 1868, when an Insane is, with the concurrence of the Inspector-General of H. M.'s British Hospitals, sent from his corps to the Bhowanipore Lunatic Asylum, Calcutta, his discharge documents, including his company's defaulter sheet, will be forwarded by post to the Commandant of the Chinsurah Depôt.

G. O. 244,  
 23rd August, 1869.

The third page of the Board proceedings is to be left blank ; a copy of his detailed medical history, supplemented by the opinion of the Medical Board, and approved by the principal medical officer of the district, is to be attached to the Board proceedings.

One set of the medical documents above alluded to will also accompany the Insane to the Bhowanipore Lunatic Asylum, for the information of the authorities of that establishment, and subsequently to be sent home with the Invalid, when he embarks for England. A third set of the same medical documents, together with the medical history sheet, is to be sent to the office of the Inspector-General of Hospitals, British Forces.

4. When insane soldiers are sent to Bombay for embarkation, two copies of their "detailed medical histories" should in every instance be furnished to the Inspector-General of Hospitals, British Medical Service, of that Presidency, by the medical officer or officers in whose charge such patients may be at the time of being invalided.

Departmental Circular  
 $\frac{21}{68}$ , 15th June, 1868.



5. In cases of Epileptics, a certificate that the patient has been seen by a medical officer in a state of epileptic convulsions, should be written on each copy of the detailed medical history sheet.

Departmental Circular,  
19th September, 1867.

6. Insanes are not to be embarked in any of Her Majesty's troop-ships, but by Cape route only.

Departmental Circular  
 $\frac{165}{M.O.}$ , 18th February, 1870.

7. Whenever an insane woman is sent to the Asylum at Bhowanipore, the fullest particulars regarding her relatives, place of settlement, &c., are to be forwarded without delay to the Commandant of the Chinsurah Depôt.

G. O. 244,  
23rd August, 1869.

## SECTION XXXVI.

### INVALIDING.

1. It is the duty of Invaliding Committees to ascertain by strict and careful examination whether or not the men presented to them are actually unfit to render further effective service to the State, and such men will be deemed unfit for further service under the following circumstances :—

G. O. 379,  
12th December, 1868.

(a.)—Short service men, who have become physically unfit for the active duty of a soldier, from protracted disease shewing itself in the course of their service, to whom treatment in hospital and repeated visits to their homes, on sick leave, have afforded no benefit—men who in many instances originally of feeble health, and strength, ought not to have been enlisted, and should be discharged at once, the testimony of their medical history sheets, and the experience of the commanding officer of the regiment, being consulted by the Invaliding Committee.

(b.)—Men of the full period of 15 years' service, who, from disease contracted during the course of their military service, of such a nature and duration as to offer very little hope of recovering from it after all the remedial measures have been fairly tried, have become inefficient soldiers and incapable of military duty and endurance, to which testimony is borne by the medical history sheets, and the knowledge and experience of the commanding officer.

(c.)—Long service men, who, although not much in hospital, and not suffering from disabling disease, yet, from old age and length of service, have become debilitated, and physically incapacitated for active service, whose senses and mental perceptions and general intelligence have become so dull and impaired as to render them unable to perform their military duties to the satisfaction of their commanding

officer, and up to the requirements of the Service—men whose presence in the corps is more or less an encumbrance as long as they occupy the place of able-bodied men.

2. No soldier should be invalided for the loss of an eye, the other being sound.

No soldier, except cavalry or artillery, should be invalided for single hernia, unless the rupture is of large size, and is with difficulty kept reduced.

3. Invaliding Boards must invariably be presided over by the Deputy Inspector-General of Hospitals, British Forces, or by the superintending Staff Surgeon-Major of the circle.

4. The dates for assembling Medical Boards will be fixed by Officers Commanding Divisions and Districts, in communication with the administrative Medical Officer, British Forces, of the circle, and so as to correspond with the instructions for movement and embarkation received from the Quarter-Master General.

5. The Divisional and District Military and Medical Authorities will arrange for the examination of men on detachment or of corps at out-stations.

6. Medical Boards, when invaliding men who have been enlisted in India and are not desirous of leaving the country, will refrain from recommending them to be sent to England or the Colonies.

G. O. 183,  
29th June, 1869.

7. For a list of the medical returns requisite in the case of Invalids, see Section XLIX., Part A 1., para. 39.

8. Medical officers in charge of Corps, and Batteries, and of Convalescent Depôts, will prepare Return No. 821 in triplicate, to be signed by the commanding officer and surgeon, and afterwards countersigned by the Officer Commanding the Station and the Deputy Inspector-General of Hospitals, or Superintending Surgeon-Major of the circle.

G. O. C. C.  
30th August, 1870,  
para. 7.

Two copies of W. O. Form No. 821 will be sent to the Inspector-General's Office, Simla.

The third copy will be sent by post, as directed in the discharge order, or given to the military officer proceeding in command of the

party to the port of embarkation, who will transfer it to the Military Authorities there. It will be by them given to the military officer in command of the party embarking for England, for final transmission to the principal medical officer at the port of landing.

9. The detailed medical histories of men invalided to England will be made out by regimental medical officers, in triplicate, for each man, and will be submitted to the Station Invaliding Board, who will ascertain that the information under each heading is complete, and will countersign them. One copy will be sent direct to the Inspector-General of Hospitals, British Forces.

*Idem, para. 8.*

The second copy, together with the medical history sheets, will be handed to the medical officer proceeding to the port of embarkation, for transfer to the principal medical officer there. These documents will be afterwards handed over to the medical officer embarking for England, and will finally be handed over to the principal medical officer at the port of landing.

The third copy, when signed by the Board, will also be signed by the Deputy Inspector-General of Hospitals, or Staff Surgeon-Major presiding in his capacity as principal medical officer of the Division or District. This copy will be transferred, through the Military Authorities, to Officers Commanding Regiments, and will be attached to "Proceedings of Regimental Boards." W. O. Form 83.

10. In the case of Invalids who elect to proceed to the Colonies, or to remain in India, one copy only of the detailed medical history will be required for each man. This copy, signed by the Board, and by the Deputy Inspector-General, or Superintending Surgeon-Major of the circle, will be forwarded, together with the man's medical history sheet, to the office of the Inspector-General of Hospitals, Simla.

*Idem, para. 8.*

11. Each medical officer in charge of a party of Invalids will be furnished, by the President of the Invaliding Board, with blank forms, in duplicate, of a "Return of Invalids," intended to shew the disposal of the party. This he will hand over complete to date to the principal medical officer at the port of embarkation.

*Idem, para. 9.*

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The principal medical officer will, at the termination of the invaliding season, transfer one of these sets of returns to the Inspector-General of Hospitals, British Forces.

12. The necessary blank forms of Invalid Documents will be supplied from the office of the Inspector-General of Hospitals, British Forces, Calcutta, and regimental medical officers will, as soon as possible, acquaint the Deputy Inspector-General of Hospitals, British Forces, there, with the number of men they propose to bring forward to be invalided.

13. Regimental medical officers will also apply to the Deputy Inspector-General of Hospitals, British Forces, Calcutta, for blank forms, for the men of their corps to be invalided from Hill Convalescent Depôts, and, after inserting the necessary information, will transmit the documents, together with the men's medical history sheets filled up to date, to the medical officers of these depôts, who, in the first instance, will communicate to regimental medical officers the names of men of their corps about to be brought forward.

14. Any Invalids, whose fitness for the fatigues of the Overland Route may have become doubtful, after departure from Allahabad, will be brought before a Medical Board at Bombay, in view of their being sent by the Cape Route.

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## SECTION XXXVII.

## LEAVE OF ABSENCE.

1. The application for leave of absence from a medical officer can be proper only when, the Regiment being healthy, the attendance of one of the medical officers can for a time be dispensed with, or that the indulgence of leave of absence to any particular medical officer is an object of most material importance to his private concerns, or to the state of his health.

G. O. 182,  
20th July, 1870.

Deputy Inspectors-General of Hospitals, previous to availing themselves of privilege leave, must obtain the sanction of the Commander-in-Chief, through Divisional Commanders and the Inspector-General.

Leave to medical officers on private affairs is restricted to one year.

2. Application for leave must be despatched to Army Headquarters in time to admit of the General Order granting the leave, being received by the applicant before quitting his regiment or station, after giving a margin for the contingency of explanation, or deficient documents, being called for.

G. O. 182, para. 33,  
20th July, 1870.

3. Transmitting officers will be good enough to cause the date of commencement of the leave to be altered if it appears to them that the allowance of time indicated has not been made; and telegraphic communications on this subject will not be attended to, except in cases of the clearest urgency, the nature of which must be explained in the telegram.

Idem, para. 34.

4. All officers of the British Service applying for leave to England, with the intention of retiring or exchanging, must furnish, with their applications for leave, a certificate of "no demand" from the Military Accountant, for which

Idem, Section vii.,  
para. 3.

application is to be made in the first instance to the Paymaster of the regiment, who will transmit it through the Divisional Paymaster.

5. To accompany all applications for leave out of India :—“ I certify that I have been made acquainted with the rule that I am to report my arrival at, and departure from, the port of embarkation to the local Military Authorities.”

To accompany all applications for leave in India :—“ I am aware that it is my duty to report my arrival and departure at all Military Stations, including Hill Stations, at which I may remain temporarily during my leave of absence.”

6. Medical officers applying to the Military Authorities for privilege or other leave, must first obtain the sanction of the Deputy Inspector-General of Hospitals, H. M.'s British Forces.

Departmental Circular  
454 A. C., 26th May, 1862.

They must also forward their address, and notify any change of residence to the Inspector-General of Hospitals; and they must not go into the interior of the hills beyond the sanatoria without special permission.

7. Medical officers, when submitting applications for privilege leave, should state at the time that all reports and returns due up to date have been prepared and forwarded.

Departmental Circular  
377 A. C., 8th May, 1862.

8. When forwarding departmental applications for leave, medical officers holding separate charges must state what arrangements they have made for the performance of their duty during their absence.

9. (a.)—Officers returning from furlough to Europe on leave beyond sea, or officers removed from a regiment, appointment, or station at their own request, or on regimental or departmental promotion, or to join a new appointment, will be allowed 15 days for preparation from date of arrival or being struck off duty.

G. G. O. 774,  
22nd September, 1864.

On special grounds, the period may be extended to 30 days, by the Officer Commanding the Division, District, or Garrison.

(b.)—Every officer, at the expiration of the period allowed for preparation, is required to join his corps, station, or appointment by

the most expeditious mode of travelling, and without unnecessary delay on the road.

(c.)—Officers who may be unavoidably delayed by sickness, or other circumstances, must report the cause and period of such delay, furnishing medical or other certificates to the Officer Commanding the Station, or that nearest to which such delay may have occurred.

(d.)—In very special cases, Officers Commanding Divisions may sanction a slower mode of travelling, either for part or for the whole of the journey, but any such indulgence, and the reasons for granting it, must be reported at once to His Excellency the Commander-in-Chief, or to the Government, according to the nature of the officer's employment.

(e.)—This ruling is made applicable to the three Presidencies.

10. An officer proceeding home on leave, on medical certificate or private affairs, on duty with troops round the Cape, will, in the latter case, be granted two additional months' leave of absence.

G. O. 182, para. 32,  
20th July, 1870.

11. Leave on account of ill health is restricted to six months as a maximum period; if extensions are granted, such extensions are not to exceed three months.

Idem, para. 62.

12. All sick officers proceeding down the Indus are to appear before the standing Medical Committee, Kurrahee.

G. O. 182, para. 31,  
20th July, 1870.

13. All sick officers recommended to be sent to England will appear before a final Medical Invaliding Committee at the port of embarkation. This does not apply to cases in which the original Medical Committee was presided over by the Inspector-General of Hospitals, British Forces. The decision of a committee so presided over is final.

G. O. 268,  
14th September, 1869.

14. A medical certificate recommending leave of absence to an officer will be invalid, unless the officer to whom it is granted avails himself of it at once.

G. O. C. C.  
26th June, 1865.

15. Warrant officers are entitled to a furlough to Europe on sick certificate for two years.

G. G. O. 207, 1869.

*District Leave.*

16. Officers can go where they like within Presidency limits when on recreation leave; if extension of district leave is required beyond the limit allowed (10 days) for such leave, the whole must be converted into privilege or general leave. Officers on such leave must observe strictly the regulations requiring reports of arrival at, and departure from, all military stations.

G. O. 25,  
4th February, 1870.

*Privilege Leave.*

17. Unless when special reasons exist for restricting the indulgence, an officer obtaining privilege leave, is free to go *anywhere* whence he can return within the term allowed him.

G. O. 234,  
5th September, 1870.

18. Officers of Her Majesty's Service are eligible for general leave, in extension of privilege leave.

G. G. O. 403,  
17th April, 1865.

19. An officer is prohibited from proceeding on privilege leave, with the purpose of obtaining an extension on a medical certificate granted to him before leaving his post.

G. O. 182, para. 49,  
20th July, 1870.

20. Privilege leave to the plains may be granted during the winter months to all officers serving with regiments located at hill stations, provided the efficiency of their corps is not in any way impaired thereby, and the prescribed amount of private leave is not exceeded.

G. O. 174,  
21st June, 1869.

21. The rule on which an officer cannot be absent on privilege leave on the 1st January is abolished; all that will be required is, that no officer be allowed privilege leave for more than 60 days at one time, or more than 60 days altogether, between the 1st January and 30th December in each year.

G. G. O. 403,  
17th April, 1865.

22. If an officer exceeds his privilege leave, a full statement of the circumstances must be rendered to Army Head-Quarters, for the consideration of the Commander-in-Chief.

G. O. 258,  
8th August, 1868.



23. The indulgence of privilege leave, as granted to commissioned officers, is granted to warrant officers, provided their departmental superiors are satisfied that proper arrangements are made for the performance of their duties during their absence, and that no additional expense to the State is incurred.

G. O. C. C.  
4th June, 1864.

24. Extension of leave on sick certificate.

(a.)—Officers on leave at Hill Sanitaria other than Simla, desirous of appearing before a Medical Committee, in view to obtaining an extension of leave, must obtain permission to do so from the General Officer Commanding the Division in which the Sanitarium is situated, forwarding with their application a statement of their case.

G. O. 209,  
20th July, 1868.

(b.)—Officers on leave at Simla desirous of appearing before a Medical Board, will forward their application for permission to do so to the Adjutant-General, or in his absence to the officer in charge of the Adjutant-General's Office, Simla.

25. The medical officer who attends a sick officer should not, if it is avoidable, be a member, and can never be President of the Medical Committee before which he appears.

G. O. C. C.  
9th July, 1863.

#### *Sick Leave in India.*

When an officer obtains sick leave in India, three copies of his <sup>retained</sup> ~~detached~~ medical history and medical certificate (see para. 27) are required:—

One copy is to accompany the officer's application for sick leave.

One copy is taken by the sick officer along with him.

One copy is to be sent by the President of the Medical Board, departmentally, to the Inspector-General of Hospitals, British Forces, Army Head-Quarters.

#### *Sick Leave out of India.*

26. Any officer who leaves India on sick leave is required to produce a certificate of fitness for duty, before he can be allowed to return.

G. O. 380,  
12th December, 1868.

27. When an officer's health demands leave out of India, a statement of his case (detailed medical history in quintuplicate if the



officer proceeds viâ Bombay, in quadruplicate, if viâ Calcutta) must be made out, and signed by the medical officer in charge.

The following certificate will also be attached to each copy of the sick officer's case:—

I, A. B., Surgeon——— at or of———, do hereby certify that E. F., Lieutenant of———, is in a bad state of health, and I solemnly and sincerely declare, that, according to the best of my judgment, a change of air is essentially necessary to his recovery, and therefore recommend that he may be permitted to proceed to——— for a period of———

*(Signature of Regimental Surgeon.)*

Certified at——— this——— day of——— by the President and Members of the standing Medical Committee, who are of opinion———

*(Signature of President and Members of Committee.)*

28. If the Committee is of opinion that the sick officer should proceed on sick leave, in anticipation of the Commander-in-Chief's sanction, they ought to notify this in their certificate.

If the Committee does not agree with the surgeon, they will record their own opinion of the case.

29. The route by which a sick officer is to proceed home is to be decided, on professional grounds, by the Medical Board before which he appears, and the fact of it having been so is to be invariably specified in the report of the proceedings.

30. Between the 1st October and the 15th March (the troop-ship <sup>As a soon</sup> *service*), medical officers who may be entitled to a passage at the expense of the State, are to proceed to Bombay, for transport in one of H. M.'s troop-ships; except

G. O. 1109,  
28th September, 1869.

(a.)—When ordered to accompany troops round the Cape.

(b.)—When it is decided, on medical grounds, that it is necessary they should proceed home by some other means of transport.

31. Station Medical Committees should not recommend officers for leave to England, but for leave to appear before the standing Medical Board at Calcutta, Bombay, or Kurrachee, leaving it to that Board to recommend for leave home, if necessary.

G. O. C. C.  
9th July, 1863.

32. The detailed medical histories and accompanying medical certificates of officers who have passed the Station Medical Committee, being duly signed, are to be distributed as follows :—

(a.)—When an officer is ordered to proceed viâ Calcutta, to appear before the standing Medical Committee there—

One copy of his case, &c., is taken by the sick officer, for his own use in Europe.

One copy of his case, &c., accompanies the sick officer's application for leave.

Two copies of his case, &c., are forwarded to the Deputy Inspector-General of Hospitals of the circle.

(b.)—When the sick officer is ordered to proceed viâ Bombay, to appear before the standing Medical Committee there—

Two copies of his case, &c., are to be taken by the officer himself, one for his own use in Europe, and the other for record in the office of the standing Medical Committee, Bombay.

One copy accompanies the sick officer's application for leave.

Two copies are sent to the Deputy Inspector-General of Hospitals of the circle.

(c.)—When the sick officer is ordered to proceed viâ Kurrachee, the same rule is followed as for Calcutta.

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## SECTION XXXVIII.

## LOSSES OF—DAMAGE TO—GOVERNMENT PROPERTY.

## 1. Camp equipage, &amp;c.

Officers Commanding Regiments in which proper store-rooms have not been constructed for the protection of Camp equipage, &c., are directed to make an immediate report to this effect, to the department of the Quarter-Master General of the Army. Officers are responsible for all losses of regimental property, incurred by omission on their part of the necessary measures to secure their safety.

G. O. C. C.  
23rd January, 1862.

This rule is equally applicable to quarters and to Camp, and to Government property, whether regimental or otherwise, entrusted to an officer's charge.

G. O. 196,  
10th June, 1868.

2. Officers supplied with Camp equipage, are liable to be called on to make good any losses or damage to the same, which may not have arisen from fair wear or from evident accident, and which may be attributable in any way to carelessness or want of due precaution and forethought, on the part of the officers themselves or those under their control.

G. O. C. C.  
31st May, 1864.

3. (a).—When Government property just received shall have been condemned by a committee, as injured apparently through exposure, delay, or neglect in transit, immediate intimation is to be given to the local Agent of the Carrying Company, in order that he may, if he desire it, see the condemned articles in the condition in which they were shown to the committee, before they are placed in store.

G. O. C. C.  
9th February, 1865.

(b).—A committee should be assembled to report upon the circumstances under which the damage occurred to any article received from the Medical Depot in a damaged state.

4. Officers of the British or Indian Service are entitled to draw compensation for loss of baggage according to their relative rank.  
 G. O.  
 5th September, 1860.

5. In the case of loss of baggage by individuals or small parties travelling by rail, they must, before leaving the station, make their claim on the station master, and demand redress. In this case, when giving up the luggage ticket, they must endorse on it what baggage is deficient, receiving from the station master a signed copy of such luggage ticket and endorsement.  
 G. O. 191.  
 10th June, 1868.

They must also at once report the case to the commanding officer of the regiment or depôt to which they are going, or, in the event of this being impossible, to the Brigade Major or Station Staff Officer on the spot.

If compensation is not given within a reasonable time, the case must be taken before a Magistrate for disposal.

6. Barrack damages.—Sec Section XXIX.

SECTION XXXIX.

MEDICAL ATTENDANCE.

1. A medical officer in India cannot refuse to attend the wife of an officer or soldier in child-birth, whatever other professional aid may be available.  
G. O. 365,  
21st December, 1869.
  
2. All officers and their families who are entitled to gratuitous attendance in a cantonment or civil station, are entitled to it at any other place where there is a medical officer paid by Government for staff or general duties.  
G. G. O. 945,  
9th September, 1869.
  
3. Officers and subordinates of the Public Works Department of all grades residing in any cantonment under proper authority are entitled to gratuitous professional attendance from the staff surgeon; and in the case of warrant officers and non-commissioned officers for their families; also officers and subordinates residing in the immediate vicinity of cantonments, although not within the actual boundary, are, when there is no civil surgeon at the station, entitled to similar attendance from the staff surgeon.  
G. G. O. 725,  
8th September, 1864.
  
4. The *staff surgeon* is the proper medical attendant of all civil public establishments, located in a military cantonment, and the *civil surgeon*, of all officials of these offices situated in the civil lines. When both the civil surgeon and members of the civil service reside within the military cantonment for their own convenience, all purely civil establishments in the military as well as civil cantonments should be attended by the civil surgeon.  
Letter from Adjutant-General to Secretary to Government of India, Military Department, 1495.  
3rd August, 1870.
  
5. Any medical officer serving with the military branch shall, without delay, attend on any sick officer who may require him to do so; and he, having given such aid or advice as the circumstances may

Medical Regulations,  
1851, Chap. xlii. para.  
15.



call for, shall transfer the case to the care of the medical officer of the applicant's own corps, or to the staff surgeon, should the applicant be on the staff of the station or division, or a temporary resident at the station.

G. O., 29th August, 1861.

6. A medical officer must always be present during Ball-firing.

7. Parades.—See Section XX., paragraphs 6 and 7.

At Hospital.—See Section XX., paragraph 5.

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## SECTION XL.

## MEDICAL HISTORY SHEETS.

1. The information required by the Medical Regulations, page 117, stated in the margin,\* must be furnished to the surgeon of a regiment by the adjutant, acting under the orders of his commanding officer. The particulars in each case will be noted on a separate piece of paper, and signed by the adjutant. The surgeon will complete the Medical History Sheets from the information thus obtained, and sign the document. It is not necessary that the adjutant or commanding officer should sign any part of the Medical History Sheet of a regiment.

\*1. Date and place of enlistment; age last birthday; former trade or occupation.

2. General remarks on habits and conduct in the Service; temperance, &c.

3. Rank and dates of promotion, also dates of transfer to other regiments; dates of punishment, whether corporal or otherwise.

2. The same order applies to the Medical History Sheets of all discharged men.

3. When a man is brought before an Invaliding Board, his Medical History Sheet should be complete up to date.

4. The Medical History Sheet of an invalid should accompany the second copy of the man's detailed Medical History.

5. Medical History Sheets and Casualty Reports. As soon as possible after the death of any non-commissioned officer or soldier, his Medical History Sheet is to be sent, together with the usual Casualty Report, to the Inspector-General's Office, at Simla, through the Deputy Inspector-General of Hospitals, British Forces. Casualty Reports are not required in duplicate.

Departmental Circular  
5906, M. D., Statistical,  
1st December, 1865.

6. The Medical History Sheets of time-expired men who go home, are to be given over to the medical officer proceeding with the party to which the men are attached, who will transfer them to any medical officer who may subsequently take over the medical charge. Medical History Sheets of time-expired men, or men discharged by purchase to remain in India, or to go to the Colonies, are to be filled up, and forwarded to the office of the Inspector-General of Hospitals, British Forces, Simla.

Departmental Circular  
4617, M. O., Statistical,  
26th September, 1864.

7. Medical officers in charge of Convalescent Depôts, will apply to regimental medical officers for the Medical History Sheets of men of their corps whom it may be intended to invalid from the Depôt.

These documents will be completed up to date of the men's departure from the Depôt, and given over to the medical officer proceeding in charge.

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## SECTION XLI.

## MISCELLANEOUS. MEDICINES.

1. It is optional with married officers whose families are in England, and only temporarily absent, to attend mess, or not.
- Adjt.-General's Circular  
Memo., 12th June, 1869.
2. Officers at stations are not to purchase ration, bread and meat, from the contractors, except at stations, or in camp, where they cannot be otherwise obtained.
- G. O., 8th January, 1862.
3. A regimental medical officer exchanging to the Staff takes as a matter of course, the position on the Staff roster held by the officer with whom he exchanged.
- Departmental Circular  
 $\frac{52}{68}$ , 15th September, 1868.
4. The 2nd Assistant Surgeon of a Regiment, if he has not completed his five years' tour of service, should, when his regiment is ordered home, be retained in India to complete his tour on the Staff, unless the term is very nearly completed.
- Departmental Circular  
 $\frac{43}{69}$ , 6th October, 1869.
5. Six pounds of straw per man, per day, for use in the tents, will be allowed to British troops on the march.
- G. O. 180, 14th July,  
1870.
6. In all cases where the orders of Government are required for any medicines, &c., not recognised as articles of supply, indenting medical officers are instructed to apply to the Inspector-General of Hospitals, through the proper channel, explaining the grounds on which they deem the articles in question necessary.
- Departmental Circular,  
 $\frac{2}{68}$ , 2nd January, 1868.

7. In all cases where recommendations involve extra expenditure, the fullest particulars should be furnished, for the information of Government, both as to the amount and the necessity of the outlay: as for instance, in an indent for fuel, it should be stated what number of fires are required, for what period, and what amount of charcoal or wood is required for each.

Departmental Circular  
3, Sanitary,  
18th October, 1861.

8. Surgeons are under no circumstances to countersign their own indents for medicine.

Departmental Circular  
 $\frac{22}{69}$ , 5th May, 1869.

9. In all cases of transfer of stores, medical officers are instructed to send direct to the Examiner of Medical Accounts, Calcutta, a copy of every receipt for stores received or made over.

Departmental Circular  
 $\frac{41}{69}$ , 24th September, 1869.

G. G. O. 1038,  
14th November, 1865.

10. Ice. Where ice can be obtained without excessive loss, it should be indented for, for the use of the sick.

## BRITISH TROOPS.

### SANCTIONED SCALE OF MEDICINES.

11. The quantities given are considered sufficient, except in special cases, for nine months. Indents for the difference between the quantities actually expended in each six months, and those required to complete the scale are to be prepared and sent to the Deputy Inspector-General of Hospitals of the Circle on the 1st February and 1st August of each year.

NOTE.—Detachments from Regiments must be provided from the Regimental stock.

ARTICLES.	INFANTRY.		CAVALRY.		BATTERY OF ARTILLERY.	
	lbs.	₃ 3	lbs.	₃ 3	lbs.	₃ 3
Acacia Gum ... ..	6	8 0	4	8 0	2	8 0
Acet. Scillæ ... ..	1	0 0	0	10 0	0	6 0
Acid, Acet. ... ..	3	8 0	2	8 0	1	0 0
„ Carbolic ... ..	2	0 0	1	8 0	0	12 0



SANCTIONED SCALE OF MEDICINES.—(Continued.)

ARTICLES.	INFANTRY.			CAVALRY.			BATTERY OF ARTILLERY.		
	lbs.	ʒ	ʒ	lbs.	ʒ	ʒ	lbs.	ʒ	ʒ
Acid, Citric ... ..	0	8	0	0	7	0	0	5	0
„ Gallic ... ..	0	3	0	0	2	0	0	1	0
„ Hydrochlor. ... ..	1	0	0	0	10	0	0	5	0
„ Hydrocyanic dil : ... ..	0	2	0	0	1	0	0	0	8
„ Nitric ... ..	1	4	0	1	0	0	0	6	0
„ Sulphuric ... ..	1	8	0	1	0	0	0	8	0
„ Sulph. Aromat. ... ..	0	8	0	0	5	0	0	2	10
„ Tannic ... ..	0	4	0	0	2	4	0	1	4
„ Tartaric ... ..	5	0	0	3	8	0	1	12	0
Aloes Socotrina ... ..	0	3	0	0	2	0	0	1	0
Ammonia Carbonas ... ..	3	0	0	2	8	0	0	12	0
„ Hydrochlor : ... ..	1	0	0	0	10	0	0	8	0
Ammoniacum ... ..	0	6	0	0	2	0	0	1	0
Antim : Tartaratum ... ..	0	3	0	0	2	0	0	1	0
Argenti Nitras ... ..	0	6	0	0	4	12	0	2	0
Assafœtida ... ..	0	6	0	0	4	0	0	1	0
Beberia Sulphas... ..	0	1	0	0	0	10	0	0	4
Bismuth Album ... ..	0	2	0	0	2	0	0	1	0
Borax ... ..	0	8	0	0	4	0	0	2	0
Calamina præp :... ..	0	8	0	0	6	0	0	2	0
Calumbæ Rad ... ..	0	8	0	0	6	0	0	2	0
Calx Chlorata ... ..	2	0	0	2	0	0	0	12	0
Camphora ... ..	1	0	0	0	14	0	0	5	0
Cerat Calaminae ... ..	0	12	0	0	10	0	0	4	0
Cetaceum ... ..	0	10	0	0	8	0	0	4	0
Chirata ... ..	9	0	0	6	0	0	2	0	0
Chloroform ... ..	1	8	0	1	0	0	0	7	0
Chlorodyne (Hyper-Chlorodyne) ... ..	0	8	0	0	6	0	0	2	4
Cinchon. Cort ... ..	2	0	0	1	8	0	1	0	0
„ Pulv ... ..	2	0	0	1	8	0	1	0	0
Collodium ... ..	0	3	0	0	3	0	0	1	0
Copaiba ... ..	9	0	0	6	0	0	2	0	0
Creasotum ... ..	0	1	0	0	1	0	0	0	4
Creta Præparata... ..	6	0	0	4	0	0	1	4	0
Cubeba ... ..	8	0	0	6	0	0	2	0	0
Cupri Sulphas .. ..	0	6	0	0	6	0	0	3	0
Diosna Crenata (Bucco) ... ..	0	3	0	0	2	0	0	1	0
Disinfecting fluid (Condy's) ... ..	2	8	0	2	0	0	1	0	0
Elaterium ... ..	0	0	1	0	0	1	0	0	1
Empl. Cantharidis ... ..	4	8	0	3	0	0	1	4	0
„ Hydrarg :... ..	0	8	0	0	6	0	0	3	0
„ Lythargyri ... ..	1	0	0	1	0	0	0	8	0
„ Resinæ ... ..	8	0	0	6	0	0	2	8	0
„ Saponis ... ..	1	8	0	1	8	0	0	12	0
Ergota ... ..	0	1	0	0	1	0	0	1	0
Extract Belladonnæ ... ..	0	2	0	0	1	8	0	1	0
„ Cannabis Indica ... ..	0	1	8	0	1	0	0	0	6
„ Colchici Acet. ... ..	0	1	0	0	1	0	0	0	8
„ Colocinth Co. ... ..	0	14	0	0	10	0	0	3	0

## SANCTIONED SCALE OF MEDICINES.—(Continued.)

ARTICLES.	INFANTRY.			CAVALRY.			BATTERY OF ARTILLERY.		
	lbs.	3	3	lbs.	3	3	lbs.	3	3
Extract Conii ... ..	0	1	0	0	1	0	0	0	4
„ Filicis Liquid ... ..	0	2	0	0	1	4	0	0	10
„ Gentianæ ... ..	0	7	8	0	5	0	0	2	0
„ Hæmatoxyli ... ..	0	2	0	0	1	4	0	0	10
„ Hyoscyami ... ..	0	3	8	0	2	4	0	1	0
„ Taraxaci ... ..	1	0	0	0	12	0	0	6	0
Ferri et Ammonia Citras ... ..	0	1	0	0	1	0	0	1	0
„ Quinæ Citras ... ..	0	12	0	0	8	0	0	6	0
„ Iodidum ... ..	0	2	0	0	1	4	0	1	0
„ Peroxyd ... ..	0	10	0	0	6	0	0	3	0
„ Sulphas... ..	0	10	0	0	6	0	0	3	0
Galla ... ..	0	6	0	0	4	0	0	2	0
Gentianæ Rad: ... ..	2	0	0	1	10	0	0	8	0
Glycerinum ... ..	0	8	0	0	6	0	0	4	0
Glycyrrhiza Rad: ... ..	1	0	0	0	12	0	0	8	0
Hæmatoxyli Lignum ... ..	0	12	0	0	10	0	0	6	0
Hydrarg: Calomelanos ... ..	0	10	0	0	7	0	0	4	0
„ Corrosiv: Sublimat ... ..	0	0	8	0	0	6	0	0	2
„ Cum Cretæ ... ..	0	2	0	0	1	4	0	1	0
„ Iodum Rubrum ... ..	0	2	0	0	1	4	0	0	4
„ Oxydum Rubrum ... ..	0	1	0	0	1	0	0	0	4
Iodum ... ..	0	3	0	0	2	4	0	1	0
Ipecac: Rad: Pulv: ... ..	2	8	0	2	0	0	1	0	0
Jalapæ Rad: Pulv: ... ..	2	8	0	2	0	0	0	12	0
Kameyla ... ..	0	3	0	0	2	10	0	1	0
Kino... ..	0	3	0	0	2	10	0	1	0
Koussou (Cusso) ... ..	0	6	0	0	5	0	0	3	0
Liniment Saponis ... ..	10	0	0	8	0	0	3	0	0
Liq: Ammonia... ..	2	0	0	2	0	0	0	8	0
„ Arsenicalis ... ..	0	8	0	0	6	0	0	3	0
„ Arsenici et Hydrarg Hydriod Dono- van's Sol: ... ..	0	6	0	0	4	0	0	1	8
„ Lytta ... ..	0	4	0	0	4	0	0	2	0
„ Opii Sedativ: ... ..	0	4	8	0	3	0	0	1	4
„ Plumbi Subacetat ... ..	0	12	0	0	12	0	0	4	0
„ Potassæ ... ..	1	8	0	1	0	0	0	6	0
„ Quinæ Amorphous ... ..	3	bottles.		2	bottles.		1	bottle.	
Liq. Sodæ Chlorata ... ..	1	8	0	1	0	0	0	8	0
Magnesiæ Carbonas ... ..	2	0	0	1	10	0	0	10	0
„ Sulphas ... ..	30	0	0	18	0	0	10	0	0
Matica ... ..	0	2	0	0	1	0	0	1	0
Morphiæ Hydrochlor ... ..	0	1	8	0	1	0	0	0	8
Myrrhæ Gum ... ..	0	2	0	0	2	0	0	1	0
Ol: Anethi ... ..	0	0	8	0	0	6	0	0	4
„ Anisi ... ..	0	2	0	0	1	4	0	0	4
„ Cajuputi ... ..	0	2	0	0	1	4	0	0	4
„ Carui ... ..	0	1	0	0	0	10	0	0	4
„ Cinnamomi ... ..	0	1	0	0	0	8	0	0	4
„ Croton ... ..	0	2	0	0	1	4	0	0	4

SANCTIONED SCALE OF MEDICINES.—(Continued.)

ARTICLES.	INFANTRY.	CAVALRY.	BATTERY OF ARTILLERY.
	lbs. ʒ ʒ	lbs. ʒ ʒ	lbs. ʒ ʒ
Ol. Juniperi ...	0 1 0	0 1 0	0 0 4
„ Menthæ Pip. ...	0 4 8	0 3 0	0 1 0
„ Morrhuæ ...	20 bottles.	14 bottles.	8 bottles.
„ Papaveris ...	6 0 0	0 4 8	1 8 0
„ Ricini ...	48 bottles.	30 bottles.	12 bottles.
„ Tercbinth ...	10 0 0	8 0 0	3 0 0
Opium ...	0 8 0	0 6 0	0 2 0
Pareira Brav : Rad :	1 0 0	0 10 0	0 5 0
Pil. Aloes et Myrrhæ ...	0 2 0	0 1 8	0 1 0
„ Calomelaus Co. ...	0 3 0	0 2 0	0 0 8
„ Hydrag. ...	0 10 0	0 8 0	0 3 0
„ Rhei Co. ...	0 8 0	0 5 0	0 2 0
„ Scillæ Co. ...	0 4 0	0 2 10	0 1 0
Plumbi Acetas ...	1 0 0	0 14 0	0 8 0
Podophylli Resinæ ...	0 3 0	0 2 0	0 0 6
Potassæ Acetas ...	0 8 0	0 6 0	0 4 0
„ Bicarbonas ...	2 0 0	1 8 0	0 8 0
„ Bromidum ...	0 4 0	0 2 0	0 1 0
„ Caustica ...	0 0 8	0 0 8	0 0 8
„ Chloras ...	0 4 0	0 3 0	0 2 0
„ Nitras ...	3 0 0	2 0 0	0 12 0
„ Sulphas ...	0 2 0	0 1 4	0 1 0
„ Tartras Acida ...	6 0 0	4 8 0	1 12 0
Potassii Iodidum ...	2 12 0	2 0 0	0 12 0
Pulv. Antimonialis ...	0 3 0	0 2 6	0 1 0
„ Aromaticus ...	0 3 0	0 2 0	0 0 6
„ Cretæ Aromat. ...	0 8 0	0 6 0	0 3 0
„ „ „ Cum Opio ...	0 8 0	0 6 0	0 4 0
„ Ipecac Cum Opio ...	2 6 0	1 10 0	0 12 0
„ Jacobi Veri ...	6 packets.	4 packets.	2 packets.
„ Kino Cum Opio ...	0 4 0	0 2 8	0 1 0
Quassia Lignum... ..	1 0 0	0 12 0	0 6 0
Quiniæ Sulphas ...	6 0 0	4 8 0	2 10 0
Rhæi Rad. Pulv. ...	1 0 0	0 14 0	0 5 0
Sapo Duras ...	0 4 0	0 3 0	0 1 0
Sarza (Ununtamool) ...	10 0 0	7 4 0	3 0 0
Scammonii Gum Resinæ ...	0 2 0	0 1 2	0 0 6
Scilla Rad. Pulv... ..	0 2 0	0 1 2	0 0 4
Senna Folio ...	6 0 0	4 10 0	1 4 0
Sodæ Bicarbonas... ..	8 0 0	5 8 0	1 12 0
„ et Potassæ Tart. ...	4 8 0	3 10 0	1 2 0
Spirit Ammon. Aromat. ...	4 0 0	3 0 0	1 0 0
„ Chloroformi ...	2 0 0	1 12 0	0 9 0
„ Æther Nitrosi ...	4 8 0	3 0 0	1 0 0
„ Ætheris ...	3 0 0	2 4 0	0 12 0
„ Vin : Rectif ...	5 0 0	4 0 0	1 6 0
Strychniæ ...	10 grains.	8 grains.	6 grains.
Sulph. Sublimat. ...	2 0 0	1 4 0	0 6 0

## SANCTIONED SCALE OF MEDICINES.—(Concluded.)

ARTICLES.	INFANTRY.			CAVALRY.			BATTERY OF ARTILLERY.		
	lbs.	ʒ	ʒ	lbs.	ʒ	ʒ	lbs.	ʒ	ʒ
Tinct. Aconiti ... ..	0	1	0	0	1	0	0	0	4
„ Arnicae ... ..	0	2	0	0	2	0	0	0	6
„ Assafetida ... ..	0	4	0	0	3	0	0	1	0
„ Benzoin Co. ... ..	0	3	0	0	2	8	0	2	0
„ Calumbæ ... ..	0	6	0	0	4	8	0	2	0
„ Camphoræ Cum Opio ...	6	0	0	4	6	0	1	4	0
„ Cannabis Indicæ ... ..	0	2	0	0	1	2	0	0	10
„ Capsici ... ..	0	4	0	0	3	0	0	2	0
„ Cardamomi Co. ... ..	3	0	0	2	8	0	1	0	0
„ Cetechu ... ..	3	8	0	2	8	0	1	0	0
„ Cinchon. Co. ... ..	2	0	0	1	8	0	0	8	0
„ Colchici ... ..	0	4	0	0	3	0	0	2	0
„ Digitalis ... ..	0	2	0	0	1	0	0	1	0
„ Ferri Perchlorid ... ..	3	0	0	2	8	0	0	14	0
„ Gentian. Co. ... ..	2	0	0	1	8	0	0	9	0
„ Guaiaci Ammon. ... ..	0	4	0	0	3	0	0	2	0
„ Hyoscyami ... ..	3	8	0	2	8	0	0	12	0
„ Iodi ... ..	2	8	0	2	4	0	1	0	0
„ Kino ... ..	2	8	0	1	4	0	0	12	0
„ Lavandulæ Co. ... ..	1	0	0	0	12	0	0	8	0
„ Myrrhæ ... ..	1	0	0	0	10	0	0	8	0
„ Opii ... ..	8	0	0	6	0	0	2	0	0
„ Rhei ... ..	1	8	0	1	0	0	0	6	0
„ Scillæ ... ..	2	4	0	1	10	0	0	10	0
„ Senna Co.... ... ..	0	8	0	0	6	0	0	2	0
„ Valerian Co. ... ..	0	4	0	0	3	0	0	2	0
„ Zingiberis ... ..	3	0	0	2	0	0	1	0	0
Ung. Hydrarg Fort. ... ..	0	8	0	0	6	0	0	3	0
„ „ Nitrat. ... ..	0	4	0	0	2	0	0	1	0
„ Resinæ ... ..	3	0	0	2	0	0	0	12	0
„ Sulphur ... ..	2	0	0	1	8	0	0	12	0
Uva Ursi fol. ... ..	0	6	0	0	4	0	0	2	0
Vin. Antimoniale ... ..	0	8	0	0	6	0	0	3	0
„ Colchici ... ..	0	8	0	0	6	0	0	3	0
„ Ipecac ... ..	2	0	0	1	8	0	0	14	0
„ Opii ... ..	0	2	0	0	2	0	0	1	0
Zinci Chlorid. Sol. (Burnett's Disinfecting fluid ... ..	4	0	0	2	10	0	1	0	0
„ Oxydum ... ..	0	4	0	0	3	0	0	1	0
„ Sulphas ... ..	1	8	0	0	14	0	0	6	0
„ Valerianas ... ..	0	1	0	0	1	0	0	1	0

DEPARTMENTAL CIRCULAR,

24th January 1868.

## SECTION XLII.

## PAY AND ALLOWANCES.

1. All officers proceeding to England are warned that it is necessary they should provide themselves with a final "last pay certificate."  
G. O. 106,  
20th May, 1867.
2. Officers proceeding from India to England on sick certificate are entitled to the Indian pay of their rank, if they belong to regiments which arrived in India before the issue of the new passage warrant, 1864.  
G. G. O. 509, 1869.
3. The Peninsula and Oriental Steam Navigation Company's rate of passage money to Southampton is to be considered as the actual cost of a single passage to England, by ship or steamer, until further orders.  
G. O. 188,  
22nd July, 1870.
4. As a general rule, advance of pay and allowances to an officer arriving in India is restricted, unless under very exceptional circumstances, to the end of the month in which he may leave the Presidency Town, for the purpose of joining his regiment or station.  
G. O. 15,  
14th January, 1868.
5. The authorizing of advances, by Officers Commanding Divisions or Stations from Civil Treasuries, or from Divisional Paymasters, for military purposes, is prohibited, except in cases of very urgent necessity.  
G. O. 207,  
9th September, 1867.
6. An assistant surgeon succeeding to the charge of a British Regiment, or Brigade of Royal Artillery, is entitled to the staff allowance of Rs. 150 per mensem, when he does so, on the death, removal, or absence on medical certificate, of the surgeon.  
G. O. 73,  
23rd March, 1867.



A like allowance is drawn by an assistant surgeon when he succeeds to one of these charges, in consequence of the absence in England, on private affairs, of the surgeon.

G. O. 17,  
11th January, 1869.

7. An assistant surgeon who may fall into the charge of a Regiment, consequent on the illness in quarters of the surgeon, will commence to draw the temporary allowance after the expiration of one month from the date on which the surgeon was confined to his quarters through sickness.

G. O. 77,  
24th March, 1867.

8. In all future appointments of medical officers to the medical charge of Hill Depôts, the allowance is to be Rs. 150 instead of Rs. 200 per mensem.

G. O. C. C.,  
14th October, 1864.

Where a second assistant surgeon may hereafter be attached to a Depôt, he is simply to receive the pay of his rank.

9. The allowance for the medical charge of Divisional or Brigade Staff, shall in future be admitted alike to medical officers of the British and Indian Medical Services, when holding appointments of this nature irrespective of their having passed any examination in Hindostanee.

G. O. 212,  
15th August, 1870.

10. The sum of Rupees (30) thirty per mensem to a medical officer for the medical charge of station staff is admissible only at Brigade stations, or at stations once the head-quarters of a Brigade, at which the allowance has been authorizedly continued on its ceasing to be the head-quarters of a Brigade, or at those in regard to which the special sanction of Government to its being allowed has been or may hereafter be accorded.

G. O. 121 5th May,  
1869.

11. (a.)—When there is a medical officer in receipt of the allowance granted for the medical charge of the Division or Brigade Staff, that officer should be required also to attend the Garrison Military Prison without any additional remuneration.

G. O. C. C.,  
22nd November, 1864.

When no such allowance is granted, Rupees (30) thirty a month will be allowed to the officer selected for that duty.

(b.)—Application for staff pay for attendance on Garrison Prisons is made on Bengal Form No. 122.

12. The contribution of 30 days' pay to the Regimental Mess, and of 20 days' pay to the Band, on an officer's appointment or on his subsequent promotion, which is charged on the original net pay of his rank, affects English, and not Indian, rates of pay. The annual Mess and Band subscriptions may be paid on Indian rates of pay.

13. Officers of one Presidency may draw advances on account of their pay and allowances which have become due from Paymasters at any other Presidency, at which they may be residing, whether on duty, or on leave, or medical certificate, or on private affairs.

Officers so situated must furnish, with their bills, a last pay certificate from their own Presidencies, showing specifically the sums to be deducted, and the amount to which entitled, and also indicate the General Order or other authority on which they are absent.

14. Increase of pay for length of service is obtained by the officer forwarding a "statement of services" (W. O. Form 360) to the Controller of Military Accounts, who returns a written sanction for the increase, which is then drawn in the usual manner.

15. Any individual who objects to a disallowance made by a disbursing officer will appeal through him to the examiner, and the disbursing officer is bound to forward the appeal. Appeals from the decision of examiners will be made through them to the Controller of Military Accounts; and if the decision be considered by the appellants as not conclusive, the Controller will forward any further representations for the decision of the Government of India.

No officer is allowed to make a direct reference to the Adjutant-General, unless the examiner shall have refused to forward his appeal.

Under any view, the right of appeal to Government is open to all officers, it being, however, distinctly laid down that all unnecessary appeals or references to Government are to be avoided.

## SECTION XLIII.

## PRISONERS—PRISONS.

1. Medical officers are held responsible that a soldier (prisoner) is at once received into hospital, when necessary, for such treatment and change of diet as the nature of his case may demand.

Adjutant-General's Circular 90E,  
3rd September, 1864.

2. Medical officers in charge of Station Prisons, will indent on the Deputy Inspector-General of Hospitals, British Forces, Calcutta, for the following forms of medical records, to be kept up in accordance with Her Majesty's Regulations :—

G. O. 158,  
27th July, 1866,  
and  
G. O. 219,  
1st October, 1866.

Admission and discharge book.

Case book.

Medical certificate book.

Book for weekly sick returns.

Book for monthly sanitary reports.

Diary.

The monthly sanitary report book will be kept at the Prison by the medical officer in charge; the others will be kept by the medical officer of the corps in whose hospital the sick prisoners are treated.

Idem.

3. The cases of sick prisoners at stations where there are Prisons, will be shewn in the weekly sick returns sent in by the Senior Medical Officer, British Forces, for the information of the Commander-in-Chief.

Idem.

Monthly sanitary reports, similar to those for regiments, will be sent in by medical officers in charge of Prisons, to the Inspector-General or Deputy Inspector-General of Hospitals, British Forces.

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4. The senior medical officer, British Forces, as ex-officio visitor of the Prison, will see that the records are carefully and regularly kept.

Idem.

G. O. 22,  
29th January, 1866.

5. The use of the pack at punishment drill is discontinued.

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## SECTION XLIV.

## PURVEYORS.

*Rules for the guidance of Purveyors, 1870.*

1. Purveying duties of hospitals are to be performed by the Commissariat department, through the agency of Purveyors, who are to hold the same position to medical officers, as victualling gomastahs to commanding officers of regiments. These men are to take the place of hospital stewards, and are to be under the control of commissariat officers, by whom they are to be appointed.

2. They are to be appointed as follows :

*First class Purveyors.*—For regiments of infantry and cavalry, and large depôts or sanitarium.

*Second class Purveyors.*—For wings of regiments, depôts, detachments over 200 men, or smaller sanitarium.

*Third class Purveyors.*—For batteries of artillery or small detachments of infantry or cavalry, under 200 men.

If a first class Purveyor is not available, for a first class charge, a second or third class man must be appointed.

3. For any number of men under 30, the purveying duties are to be performed by the commissariat gomastah attached to the party.

4. As it is necessary Purveyors should live in the immediate neighbourhood of hospitals, or at least within easy call, they will be provided with quarters 12 × 12, with a verandah ; a godown will also be provided for the Purveyors' stores.

5. Purveyors will attend at the hospital at such hours as may be fixed by the medical officers, to receive their instructions.



6. Their establishment will be as follows:—

	Regiment of Infantry.	Regiment of Cavalry.	Brigade of Royal Artillery.	Brigade of Royal Horse Artillery.
Steward's servants ...	2	2	2	2
Clothier ...	1	1	...	1
Tailor ...	2	1	2	...
Washermen ...	1 Head and 4 men.	1 Head and 3 men.	1 Head and 3 men.	1 Head and 2 men.
	And in proportion for parties of smaller strength, and may be sanctioned by competent authority.			for sanitaria as
Peon ...	1	1	1	1

7. Though Purveyors are entertained and paid by the commissariat, they must attend implicitly to the orders of medical officers, who however have not the power to remove the Purveyor—this will be done by the commissariat department, on a proper representation by the medical officer, through the Deputy Inspector-General of the division.

8. Medical officers' orders are invariably to be in writing, and entered in a book with which the Purveyor will be provided.

9. Purveyors will see that the diets and extras ordered by medical officers are provided.

10. Purveyors will be responsible for the quality of articles provided by themselves, but as regards articles supplied by a contractor, the commissariat officer will see that supplies of a proper quality are furnished.

11. After approval of the supplies by the medical officer, they should be made over by the Purveyor to some hospital subordinate, to be nominated by the medical officer, who will see to their preparation and issue.

12. Whenever any article of diet is ordered, which may appear to the Purveyor unauthorized by the regulations, it will be his duty to point it out to the medical officer, who will then be responsible for the issue of the doubtful supply.

13. Articles of clothing, bedding, hospital miscellanies, and hospital necessaries, according to the authorized scale, must be kept in

charge of the Purveyor, and given out for use, on daily or on frequent indents, from the medical officer, and these indents must be receipted by the medical officer, on being complied with by the Purveyor.

14. Purveyors will see to the tinning of cooking utensils, &c., as required by the medical officer, the contractor for tinning utensils for barracks being employed.

15. Purveyors will accompany corps on the march, performing the same duties as in cantonments.

16. Articles of diet and extras are to be supplied by the Purveyor on a memorandum with which he will be furnished, signed by the surgeon, specifying the number of sick and the different kinds of diet to be provided.

17. Medical officers will also prepare a statement of articles issued to patients, after the morning visit by the surgeon, the issue being supported in the Purveyors' accounts, by the written orders of the surgeon. These articles need not necessarily be shewn in a separate statement, they might more conveniently be shewn in monthly and daily diet rolls, but separate from ordinary issues.

18. Purveyors are in no way concerned with the following general duties of hospitals, which to some extent were looked after by stewards:

(a.)—Seeing to cleanliness and order of hospital buildings, and bringing to notice repairs needed.

(b.)—Seeing to the cleanliness of privies and urinals.

(c.)—Seeing that doonah is properly applied to the pans, that the stool pans are emptied as required, and disinfected when directed.

(d.)—Seeing to the cleanliness of kitchens, cutting up rations, and distribution of diets.

(e.)—Charge of renewal or repair of barrack furniture.

(f.)—Arrangement of bed-head tickets, cots, chairs, tables, close stools, &c.

(g.)—Lighting of hospitals.

19. Purveyors will not have charge of bazaar medicines which will be under charge of, and issued by, apothecaries.

20. Purveyors will have charge of oil for hospital, and see to its prescribed issue.

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21. Purveyors will not prepare diet rolls ; similarly Purveyors will not prepare requisitions which subsequently become the vouchers for their issues.

22. Purveyors will be supplied with stationery by commissariat officers.

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NOTE.—Revised regulations for the Purveyors' department will probably be issued in 1871.

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## SECTION XLV.

### QUARTERS.

1. The monthly scale of charge for public quarters supplied to commissioned officers, when the full accommodation is provided, is—

G. G. O. 859,  
1866.

	Rs.
Colonel or Lieutenant-Colonel ...	100
Major ...	80
Captain ...	50
Lieutenant ...	30
Ensign ...	25

Medical officers according to their relative rank.

2. Barrack Damages.—See Section XXIX.

3. Statement showing space per man allowed in barracks, hospitals, cells, guard room, &c., for European troops in the plains and hills :—

Quarter-Master General's  
Circular, 26th September,  
1867.

	Superficial space per man.	Cubic space per man.	
Barracks, Plains ...	90 Feet.	1800 feet sq.	According to altitude of station.
„ Hills ...	77 „	1232 to 1408 „	
Hospitals, Plains ...	120 „	2400 „	Ditto.
„ Hills ...	102 „	1632 to 1836 „	
Cells ...	130 „	2080 „	
Quarter Guard Room	80.4 „	1688.4 „	
Hospital Guard Room	91.66 „	1465 „	
Married Quarters ...	364 „		
Staff Serjeants ...	{ Class A 516 „ „ B 416 „		
Schools.			

4. Guard rooms—Cubic space. These calculations are to be based on the number of men composing the guard, less the number of posted sentries.

Departmental Circular  
12/69, 17th February, 1869.

Letter from Quarter-Master General to the Secretary to the Government of India, 2163, 25th July, 1865.

5. When a regiment is struck by an epidemic or by unusual heavy sickness, the barrack room becomes partially empty.

It is usual in such circumstances to close up the companies, and to lend to the surgeon one or more barrack rooms according to his wants.

Such measures are executed by regimental commanding officers in conjunction with the surgeon, without reference to outside authorities.

6. When on regimental or corresponding duty, all medical subordinates will be supplied with free quarters, or when marching with camp equipage.

G. G. O. 550,  
5th June, 1868.

G. O. 39,  
1st March, 1867.

7. (a.)—The scale of accommodation for medical subordinates is as follows :—

Letter 191 from Secy. to Govt. of India, to Controller of Military Accounts, 7th September, 1868,

and  
Departmental Circular  
34  
68, 17th September, 1868.

	Area of main apartments, square feet.	Small room for bath and stores.	Servants' houses.
Senior Apothecary	800	2	3
Apothecary ...	670	2	2
Assistant ditto ...	500	1	3 among 2
Apprentice ...	250	1	1

(b.)—When the full amount of this scale is not provided for them, the above-mentioned are entitled to claim a proportional abatement of the deduction, from compensation for house rent. See Section XLVIII., paras. 4, 5.



## SECTION XLVI.

## RATIONS—WINES—EXTRAS.

1. It is hereby directed, that the following scale, termed “Infant Dict” be added to the Hospital dict scale, and that the same be strictly adhered to :—

G. O. 397,  
31st December, 1868.

<i>Infant diet.</i>		<i>For a day.</i>
Milk	... ..	... 1½ pint.
Sugar	... ..	... 1½ oz.
Arrowroot	... ..	... 2 oz.
Sago	... ..	... 4 oz.

*N.B.*—Children under 5 years of age are to be placed on infant dict, with extras as required; those between 5 and 8 on half; between 8 and 14 on two-thirds; and above 14 on the full quantity allowed for adults in the dict scale, published in Government General Order No. 23 of 1865.

2. A copy of the table of diets for hospitals of European troops, as authorized by G. G. O. of 6th January, and 12th June, 1865, is furnished to every European hospital.

3. All cases of disease which are of so severe a character as to require a modification of the ordinary hospital diets, or to render necessary the exhibition of extras, are to be carefully recorded in the medical case books of regiments or batteries.

Departmental Circular  
14  
68, 21st April, 1868.

4. At home and in the colonies, medical officers are obliged to record fully, in the medical case book, all cases of illness in which extras have been given, and should they neglect to comply with this instruction, they are held personally responsible for the cost of such extras. There is no reason why medical officers in charge of H. M.'s British Troops in India should be relieved from this important duty.

Circular Army Medical  
Department, 21981  
2 N,  
8th February, 1868.

5. The register of enthetic diseases, (W. O. Book 187A) will suffice as a record of the treatment of such cases when the patients in question can be treated on the ordinary hospital diets. When extras are judged to be indispensable, the cases must in every such instance appear *also* in the ordinary case book, and the necessity for the issues must be fully and clearly shewn.

6. The issue of such medical comforts as port wine, or malt liquor, to men, women, and children who are not patients in hospital, is unauthorized, and their value is *liable* to be disallowed.

This order does not interfere with the action of G. O. dated 15th July, 1865. See Section LV.

7. (a.)—The expenditure of wine is not to exceed 72 bottles of wine, for every 20 patients, per month.

(b.)—One bottle of brandy = 3 bottles of wine, 1 one bottle of wine = 3 bottles of beer.

(c.)—The contents of a bottle of wine are assumed to be 23oz., and of a bottle of brandy 22oz. All surplus to these contents being credited monthly.

(d.)—The above allowance is a most liberal one, and is not to be exceeded, except under the most exceptional circumstances; any issue in excess will be sanctioned only on the fullest and most satisfactory explanation.

(e.)—Liquors are obtained daily from the Purveyor, on form No. 3 (daily abstract.)

(f.)—A “statement of the detail of expenditure” of liquors is sent in at the beginning of each month for the previous month.

3. *Rations.* Requisitions for the rations required each day, are to be handed over to the Purveyor by 4 p. m., on the day previous.

4. (a.)—Ration meat should be of the best grass-fed. Hospital rations will be inspected by a medical officer. If the rations supplied for the corps or hospital are not considered good, the objection will be reported to the commanding officer; the option of exchange is not allowed, but the commanding officer will at once assemble a regimental committee, to examine and report on

Departmental Circular  
49  
68, 23rd November, 1868.

G. O. 216,  
15th August, 1870.

G. O. C. C.  
9th September, 1865.

the articles: the committee will record in the report of their proceedings their reasons for the condemnation, whether the rations are deemed of "inferior quality" only, or "positively unwholesome," "diseased," &c.

The decision of the regimental committee on all rations is final and absolute, as regards the soldier.

In order to prevent the inconvenience to which the soldier is subjected by the condemnation of the meat ration, in places where no good substitute can be procured, the officer commanding the station may use his discretion in allowing the condemned rations to be issued, should the officer commanding the corps or detachment, with the concurrence of the medical officer, desire it.

Adjutant-General's Circular, 15th March, 1869. (b.)—Cysted beef is not of necessity to be rejected.

G. O. C. C. 5. The existing scale of rations per man  
9th September, 1865. per diem for all seasons of the year is:—

Bread, 1lb., best quality, equal to that provided for hospital diet, meat 1lb., best grass-fed; mutton only once a week. The meat will be cut up into joints, and those parts of the animal (such as the ribs and upper joints of the foreleg) as are more than two-thirds bone, will be excluded from the ration.

Flour, rice, 4oz., at the option of the soldier, when choice must be made for fixed periods of not less than 15 days.

Sugar, 2½oz.

Tea, black, ⅕oz., or in lieu coffee, 1⅔oz.

Coffee may be substituted for tea (in the proportion of 2lbs. of the former, to 1lb. of the latter,) whenever tea is not procurable, or coffee may be preferred, or is at hand.

Salt, ⅔oz.

Vegetables, 1lb., potatoes as long as possible, and when they fail, other vegetables that may be in season to be supplied at discretion by commissariat department.

6. The Government of India have sanctioned the substitution of  
G. O. 69, onions, pumpkins, and other country vegetables, to  
26th March, 1869. the troops between the 15th June and the 15th

October, in lieu of potatoes, which it has been represented cannot always be obtained in the plains of a wholesome description during the rainy season.

The issue of potatoes will, however, be resumed as soon after the 1st October as possible.

Firewood, 3lbs.

7. During the hot season, the commanding officer, in communication with the medical officer of a regiment, will determine whether any men on account of sanitary reasons should not act as orderlies in the cook-room.

G. O. C. C.  
9th September, 1865.

8. The issue of *dhall* is authorized to European troops in lieu of vegetables, whenever the latter cannot be procured, or a change is considered desirable for the health of the men.

The vegetable ration is 1lb., and 1oz. of *dhall* is the equivalent of 4oz. vegetables.

Whenever part *dhall* and part vegetables are issued, the latter should never, if practicable, be in less proportion than 8oz.

When *dhall* is substituted entirely for vegetables, a special report of the cause is to be made to the Adjutant-General, for the information of the Commander-in-Chief.

9. Arrangements can be made by commanding officers for decreasing for a time the soldiers' ration of meat, and increasing proportionally that of bread, without extra expense to the State, when the commanding and medical officers of a regiment or battery may consider this change of diet desirable. Accordingly, when any such change may be deemed expedient on account of the weak state of the men, the commanding officer of the regiment or battery, with the concurrence of the medical officer in charge, will report to Army Head-Quarters by telegraph or post, according to the urgency or otherwise of the case, for His Excellency's orders, pending receipt of which no change of diet will take place.

G. O. C. C.  
13th May, 1863.

The same course may be adopted with other articles of rations under similar circumstances.

10. A reasonable discretion is allowed to medical officers, in recommending the issue of extra rations, &c., in cases of real need the expediency of this measure, by which at times considerable expense is incurred, must however be clearly established.

G. O. 251,  
30th October, 1867.



11. When the issue to the troops of any article involving expense to the State is authorized by division or station orders, the period must be specified: this in no case to have effect for more than one month.

G. O. 35,  
21st February, 1867.

When the continued issue of such articles is deemed necessary, the order must be repeated at the expiration of the period previously sanctioned, and must be supported by the necessary medical or other certificate for the further supply, as in the first instance of issue.

Rations, &c., on board hired ships.

12. The scale of rations, medical comforts, water and forage for sea-going ships as laid down in the regulations, for H. M.'s transport service, is to be observed in respect of all ships employed as transports, and all hired troop-ships.

G. O. 262,  
8th November, 1867.

13. An additional daily ration of  $\frac{1}{2}$  oz. lime juice and  $\frac{1}{2}$  oz. sugar unrefined, for the first twenty days after leaving any Indian port, increased to 1 oz. lime juice and 1 oz. sugar, from the twenty-first day to the end of the voyage, is allowed in addition to the admiralty scale. Porter is to be considered as beer or porter.

Idem.

14. In the case where salt meat issued for rations, on board ship, loses (from age or other cause) one-half of its weight, in the process of cooking, the military commanding officer is to appoint a Board of three competent persons, to investigate the circumstances; and if it should prove that there has been neither carelessness nor ignorance evinced in the cooking of the meat, the master of the ship is authorized to supply an additional quantity of the same species, equal to one-third of the original quantity or ration.

Idem.

15. The families of warrant officers are not messsed on board river steamers at the expense of Government.

G. O. C. C.  
12th September, 1863.

16. Warrant officers not holding Honorary Commissions, are liable under the Royal passage warrant to the following scale of messing, when provided with passages, either from or on return to India.

G. O. 221,  
20th August, 1870.

Warrant officers 1s. a day, wives 4d., and children above two years old, 2d. a day.



## SECTION XLVII.

## REMITTANCES.

1. Remittances to England are made by regimental officers, through the regimental paymaster ; by other military officers through circle paymasters monthly.

2. Remittances to England which are within the annual limit of the officer's rank, can be remitted in one sum, or in instalments, at any time within the official year.

G. O. 127,  
19th April, 1868.

3. Remittances to England can only be made by officers in favor of their wives, children, parents, father or mother-in-law, brothers or sisters, and brothers or sisters-in-law.

G. G. O. 315,  
27th March, 1868.

The prescribed limit must in no case be exceeded.

4. Officers who are eligible to make remittances to England through the Government, will be allowed to do so, by paying the amount of remittance into the public treasury when it suits their convenience.

G. G. O. 251,  
4th March, 1867.

The payment of the amount into the civil treasury must in every instance be accompanied with an authority, from a circle paymaster, for the reception of the amount into the treasury.

5. Officers attached to brigades and batteries of artillery, and regiments of cavalry or infantry, shall in future make their own arrangements with commanding officers or regimental paymasters, for the transmission by means of public transfer receipts of such pay or allowances as they may be entitled to receive during their absence on leave, or otherwise.

G. O. 97,  
23rd May, 1866.

6. Remittances in India may be made by regimental officers, through the regimental paymaster, and by other military officers through circle paymasters, on the 25th of each month, by means of transfer receipts.

7. Remittances can also be made, on the 25th of each month, on any treasury in India only, through station treasuries.

8. Money orders, on any money order office in India (on payment of a premium of 1 per cent.) are obtainable any working day, on application to the money order agent at the treasury, up to 150 Rupees.

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SECTION XLVIII.

RENT.

G. O. 249,  
30th October, 1866.

When public quarters are provided for commissioned officers not entitled to free quarters, rent will be charged by the Public Works Department.

The rent fixed for commissioned or warrant officers' quarters shall in no case exceed the amount laid down by regulations. This rent for commissioned officers is—Sec Section XLV., “ Quarters.”

2. If, owing to quarters suitable to his rank not being available, an officer is provided with quarters inferior to those authorized for his grade, he will only be charged according to the scale of quarters he actually occupies.

Idem.

3. When, in the absence of all other quarters, accommodation is provided for officers entitled to public quarters in vacant regimental barracks, on which no public money has been spent to fit them for officers, no charge will be made.

Idem.

G. O. 107,  
20th May, 1867.

This applies to commissioned officers only.

4. The rates of compensation for house rent or tentage admissible to medical subordinates when not supplied with free quarters, or camp equipage, are :—

Letter 191, from Secretary to Government of India, to Controller of Military Accounts, 7th September, 1868, and, Departmental Circular, <sup>3t</sup> / <sub>6s</sub> 17th September, 1868.	Senior Apothecary ... Rs. 50 per mensem. Apothecary                    " 30    " Assistant Apothecary ...   " 20    " Passed Apprentices         ...   " 12    " Apprentices                   ...   " 7-8    "
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5. When a medical subordinate is supplied with quarters which are not suitable to his rank (see Section XLV., para. 7), the monthly rate of house-rent to be paid for such quarter is to be decided by a station committee.

Compensation is granted monthly to the medical subordinate so situated, amounting to the difference between the sum at which the inferior quarters occupied by him have been valued by the station committee, and the sum he would have received had he not been supplied with quarters.

6. The proceedings of committees assembled to fix the rent of public quarters are to be submitted through the usual channel, for the approval of the Commander-in-Chief and the sanction of Government.

G. O. 149,  
5th May, 1868.

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## SECTION XLIX.

### RETURNS, REPORTS, INDENTS, RECORDS, BOOKS.

#### PART A1.

*Part A1 is complete in itself, the reader therefore must be careful to recollect, that any references made in it apply only to Part A1, and not to other portions of the Medical Manual.*

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MEDICAL DEPARTMENT, BRITISH FORCES.

INSPECTOR-GENERAL'S OFFICE.

*Simla, 20th July, 1870.*

THE following instructions have been prepared for the guidance of Medical officers of Her Majesty's British Forces serving in the Bengal Command, in all matters having reference to the Medical Statistics of British Troops, and they are to be considered as superseding all previous orders, on statistical matters, issued from the Office of the Inspector-General of Hospitals, Her Majesty's British Forces :—

*I.—Troops for service in Bengal landing at Bombay.*

1. Troops intended for service in the Bengal Command, and landing at Bombay from England or the Mediterranean, will begin the record of their Indian medical statistics on the day they disembark.

2. Medical officers will be careful to show as "Remained last Return" any cases of sickness which may be landed from on board ship.

3. During their stay in Bombay, and whilst on passage through that presidency, they will furnish to the Inspector-General of Hospitals, Her Majesty's British Forces of that Command, the weekly and other returns of sick required there, and concerning which they will receive instructions on landing.

4. A copy of these instructions will be supplied to each medical officer intended for service with British Troops in Bengal, on his landing at Bombay where he will also be provided, from the Inspector-General's Office, with the forms of returns required in the Bombay Command.

5. On arrival at the boundary line of the Bengal Presidency, *viz.*, Khundwah on the Jubbulpore route; the *Parbutty River* on the Indore route; and *Mooltan* on that by the Indus, they will close and forward to Bombay the returns above referred to, and will open a *fresh set* of weekly and other returns for the Bengal Presidency, on the day they enter that command, being careful to show any cases of sickness they may have brought with them from the Bombay side as "Remained



last Return." The Bombay returns must be closed to and for the day previous to that on which the troops may cross the boundary line into the Bengal Presidency, and the Bengal returns should be commenced on the day they enter that command.

6. Every case of sickness must be entered in the admission and discharge book of the Head-Quarters of the Corps, from the day of its landing at Bombay—that being the date from which the annual returns must commence.

The medical certificate which it is incumbent on medical officers to forward to the man's head-quarters, in every instance of a soldier receiving medical treatment when absent from his own corps, will supply the information necessary to make the fulfilment of this requirement complete.

7. A record of the sickness occurring in detachments landed at Bombay and proceeding to join their corps in Bengal, must, from the date of disembarkation to that of joining their corps (and in addition to the returns furnished to the Inspector-General of Hospitals in Bombay), be forwarded to the officer in medical charge of their head-quarters by means of medical certificates. Should, however, a detachment of a particular corps have been provided with an admission and discharge book for its own special use, it will then only be necessary to hand over the latter, for incorporation with that of the head-quarters, on the detachment reaching its destination.

8. In order that medical officers may, as soon as possible, be supplied from Calcutta with the blank forms of all returns in use in Bengal, and, as it sometimes happens that the destination of a corps is changed after its arrival at Bombay, medical officers proceeding to Bengal in charge of troops, will, as soon as practicable, ascertain from the proper authorities at Bombay the route by which they are to march, and communicate the same, without delay, to the officer in charge of the office of the Inspector-General of Hospitals, British Forces, Calcutta.

Should the route ordered be either the Jubulpore or Indus one, the requisite forms will be sent to Jubbulpore, there to await the arrival of the troops, in the event of its being the one first named; or, to Mooltan, if that by the Indus shall have been determined upon.



Should the march be by the Indore route, the medical officer will, in that case, be careful (in communication with the authorities at Bombay, who will be able to give him definite information on the matter,) to name some convenient station on the Bengal side of the Parbutty River to which he would wish the forms to be directed.

On arrival at a station to which it may have been understood that forms were to be sent, the medical officer will cause the necessary inquiries to be made, and, should it be found that the supply expected has not arrived, he must at once report the circumstance, addressing his letter as directed above.

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## *II.—Troops on the march in the Bengal Command.*

9. The medical statistics of troops on the march being kept distinct from those of troops occupying quarters, a fresh set of returns each marked "on the march" in red ink, must be commenced on the date on which the march began, in the case of troops already serving in Bengal, or, on that on which a corps, battery, or detachment may have entered the Bengal Presidency, if proceeding to join that command.

The series should be closed on the day the corps arrives at its destination, when a return showing the strength, admissions, and deaths which may have occurred on the march should be sent in; and, should the corps have been marching during parts of two quarters, separate returns must be prepared for such portions of each quarter.

Should the march of a corps have been made by detachments, the statistics of the portion still on the march must be kept distinct from those of the troops already arrived in cantonments, for whom a fresh set of returns must be commenced from the day after that on which they marched in. See also Section 15, page 144.

10. The following are the statistical returns and documents which will be required from medical officers in charge of troops on the march in the Bengal Presidency.

1st.—WEEKLY RETURN OF SICK, W. O. FORM No. 294A, in *triplicate*, commencing on the date the troops entered the presidency, or from that on which they began their march if already quartered in Bengal. For detailed instructions, see Sections 18 and 19, pages 146 to 149.

2nd.—In the event of a death occurring, a CASUALTY REPORT, (*single copy*), together with the man's MEDICAL HISTORY SHEET, should be forwarded to the Deputy Inspector-General of the circle, for transmission to the Inspector-General of Hospitals, British Forces, SIMLA.

(In all fatal cases occurring in the Sirhind, Lahore and Rawul Pindee Circles, a record must be made as to whether any, and if so, what, parasites were discovered at the autopsy. The same must also be noticed under remarks at page 4 of Weekly Return, W. O. Form 294A.)

3rd.—MONTHLY ABSTRACT OF SICK—(*single copy*). In preparing this return, care must be taken to fill up the strength *on the last day of the month*, or on the last day of the period for which it is made out should the time on the march not have extended to the end of the month. The average strength, and average daily sick must never be omitted; and the causes of death, and whether happening *in* or *out* of hospital, should invariably be entered on the column for remarks. Deaths occurring *out* of hospital must never be shown as *admissions* on this or on any other return.

4th. MONTHLY RETURN OF SICKNESS AMONG WOMEN AND CHILDREN—(*single copy*). This, as also the preceding return, should be made up to the last day of the month when the corps has been on the march on that date. Even should there have been no sickness, the return must be sent in with the columns of strength filled up.

Should the women and children have been left behind within the limits of the command, or have been sent on in advance, the medical officer in whose charge they were placed will send in the usual returns through the Head-Quarters of the Corps to which the women and children belong. For further details, see Section 20, page 149.

5th.—QUARTERLY RETURN OF SICKNESS—(*single copy*). See Section 16, (3rd) page 145.

6th.—MEDICAL CERTIFICATES of men of other corps treated on the march must be forwarded to their respective head-quarters. See also Section 21, page 150.

7th.—A MEMORANDUM OF ADMISSIONS AND DEATHS AMONG NON-COMMISSIONED OFFICERS, GUNNERS, AND DRIVERS must accompany each copy of Weekly Return of Sick, W. O. Form 294A, and Monthly Abstract, in the case of Brigades and Batteries of Royal Artillery.

8th.—On marching into quarters, a RETURN (*single copy*) SHOWING THE SICKNESS, DEATHS, &c., WHILST ON THE MARCH, must be forwarded as soon as possible. See also 2nd para. of Section 9, page 141.

9th.—Medical officers in charge of Detachments of Cavalry and Infantry, and of Batteries of Artillery, will send to the Head-Quarters of their Regiments and Brigades, a MONTHLY RETURN OF SICK ON THE W. O. Form 294A, which will be merely a compilation of the Weekly Returns of Sick for the number of weeks that may have fallen within the corresponding month; forwarding, at the same time, copies of any Medical Certificates, received in the course of the month, of men of the Detachment or Battery who may have been treated in Hospitals of other Corps.

The object aimed at in requiring this return, is to enable the preparations for the compilation of the general returns of Corps of Cavalry and Infantry, and of Brigades of Artillery, to be carried on, from month to month, as the necessary information is received, and thus, it is hoped, be the means of greatly facilitating their final completion.

This rule applies to troops on the line of march, as well as to those in Cantonments, but the sets of Returns for the troops under those different conditions must be kept separate.

11. The whole of the Returns above enumerated should be marked "On the March" in red ink, and (with the exception of the Monthly Return named at Section 10 (9th) page 143, which should be sent direct to the Head-Quarters of Corps) forwarded to the Deputy Inspector-General of the circle, through which the troops are at the time passing, to be by him transmitted to CALCUTTA—the Casualty Report, however, being forwarded to SIMLA as directed above, and one copy of the Weekly Return of Sick, W. O. Form 294A, being retained in the Deputy Inspector-General's Office.

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*III.—Troops transferred from the Madras and Bombay Presidencies to Bengal, and vice versa.*

12. In the event of a Regiment which may have been serving in either the Madras or Bombay Presidency being removed to Bengal, the *whole* of the Statistics, Annual and others, required for the latter

command, will be commenced on the date the corps crosses the boundary line—the Annual and all other returns, required for the presidency it is about to leave, being closed up to and for the date previous to that on which the troops may enter Bengal.

In the case of Regiments leaving Bengal for service in Madras or Bombay, the whole of the Statistics, including the Annual Returns, will be closed and forwarded to the Deputy Inspector-General of the circle, for transmission to Calcutta, on the date previous to that on which the boundary line is crossed, the fresh returns for the other presidency being opened on the day the latter may be entered.

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*IV.—Troops from Bengal leaving India viâ Bombay.*

13. When a Regiment leaves India *viâ* Bombay, the weekly and other returns for Bengal (with the exception of the annual ones), will be closed on the day preceding that on which it may cross the boundary line between Bengal and Bombay.

The Annual Returns, however, will, under those circumstances, be closed to and for the day previous to that on which the corps embarks, and will be forwarded direct to the Office of the Inspector-General of Hospitals, British Forces, Calcutta.

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*V.—Troops in Cantonments and occupying quarters.*

14. On marching into cantonments, as in the other instances already enumerated, the cases of sickness brought into quarters from the line of march must be shown as “remained last return” on the fresh set of returns.

15. Those latter should be opened on the day following that on which the troops marched into quarters, and no portion of the period the troops were on the march should ever be included in any return of troops serving in cantonments.

16. The returns, exclusive of the annual ones, required from medical officers in charge of troops in cantonments, are the same as those enumerated under Section 10 for troops on the march, with the exception of that sent in at the close of the march, but with the addition of—



1st.—A STATION WEEKLY RETURN, in *duplicate*, which, if there is only one corps present, will be prepared by the officer in medical charge, who will forward one copy *direct* to the Inspector-General of Hospitals, Her Majesty's British Forces, SIMLA, and send the other to the Officer Commanding the Station.

In the event, however, of there being more than one corps in the cantonment, the whole of the Station Weekly Returns will, in that case, be sent to the Senior Medical Officer serving there, by whom they will be embodied in a GENERAL RETURN which he will forward as directed above.

The *forms* for the Station Weekly Returns are supplied from the Inspector-General's Office at Calcutta, but the *Record Book* in which the copies are kept, will be provided by the Commissariat Department, on requisition sent through the Deputy Inspector-General of the circle.

2nd.—A MONTHLY REGISTER (*single copy*) of Admissions into hospital, and Deaths from among men occupying Upper and Lower Storeys respectively, from corps at all stations having double-storeyed barracks, to be forwarded to the Inspector-General's Office at SIMLA, through the Deputy Inspector-General of the circle.

3rd.—A QUARTERLY RETURN (*single copy*) must be forwarded within the first week after the close of each quarter. Sickness on the march and in cantonments must, in this instance, be shown on the same return, but under separate sections—the return dating, in the case of troops arriving in the presidency, from the day of crossing the boundary line, and closing, when the troops are leaving it, on the day previous to that on which they may cross into the presidency to which they are proceeding.

17. With the exception of the Station Weekly Return and the Monthly Return mentioned at Section 10 (9th) which should be forwarded as already directed at pages 143 and 145, the whole of the returns referred to above should be transmitted to the Deputy Inspector-General of Hospitals, British Forces of the circle. By the latter, after careful examination, and, if necessary, return for correction, they will be transmitted to the office of the Inspector-General of Hospitals, British Forces, Calcutta; with the following exceptions, namely,—the Casualty Report with the medical history sheet, one copy of the weekly



return, W. O. Form 294A, and the monthly Register, which should be disposed of as already directed under Sections 10 (2nd), 11, and 16 (2nd), pages 142, 143 and 145 respectively.

18. As the Weekly Returns of sick, W. O. Form 294A, are those on which most of the other records are based, their accuracy becomes essentially necessary, and therefore the following remarks have been drawn up with a view to assist executive medical officers in preparing them. They are founded on the experience gained in this Department, as to the errors into which it has been noticed that medical officers are most liable to fall, and administrative medical officers will be guided by them in testing the accuracy of returns passing through their offices. The latter are also to bear in mind that they are held strictly responsible for the correctness of all returns transmitted by them.

The following are the points on which it is found necessary to remark :—

(a.)—*Primary Syphilis*.—Under this head, on the 1st page of the weekly return of sick, must be included only cases of true indurated infecting chancre; or cases of indurated bubo, should the sore which caused the latter have healed previous to the man's admission. Bubo, however, associated and co-existing with a true syphilitic chancre, should be looked upon as part of the syphilitic attack, and must, therefore, not be shown separately.

(b.)—*Local Venereal Sore*, which should include all cases of sores arising from impure sexual intercourse, not attended with or followed by constitutional affection, must be returned under No. 10, Urinary System, and should not be included with Primary Syphilis.

Both Primary Syphilis and Local Venereal Sore must, however, be entered in their proper places on the 3rd page of the return, and the totals shown there must correspond with those on the 1st page.

(c.)—*Bubo* from Local Venereal Sore and from Gonorrhœa must be looked upon as complications of those complaints, and should therefore not be reckoned as separate diseases.

*Inflammation of Inguinal Glands*, from causes other than Venereal should be returned as such under "Absorbent System," the glands affected being named.

(d.)—*Stricture of the Urethra* must not be returned as a “Venereal disease.” The same rule applies to cases of *Phymosis* and *Paraphymosis* when not of venereal origin. Under such circumstances, those latter diseases should not be entered on the 3rd page of the weekly Return, nor included on any other return under the general heading of “Venereal Diseases.”

(e.)—*Secondary Syphilis*.—Every form of this disease, of tertiary syphilis, of syphilitic rheumatism, syphilitic iritis, &c., should be returned under the one heading of Secondary Syphilis on the 1st page, but care must be taken to detail on the 3rd page, not only the part affected in the order given at page 15 of the “Nomenclature of Diseases,” but also to state the *particular form* in which the disease may have shown itself. The totals detailed on the 3rd page must, in this case also, correspond with those of Secondary Syphilis entered on the 1st page.

(f.)—*Orchitis*.—Idiopathic orchitis, or that from injury, should be returned under “Generative System,” and must not appear on the 3rd page of the return.

Orchitis, connected with Secondary Syphilis, should be returned as Secondary Syphilis on the 1st, and its nature specified on the 3rd page, as in the case of other forms of Secondary Syphilis.

(g.)—*Cancer*.—In all such cases the form should be named. The parts affected, if local, should also be given in the order laid down at page 15 of the Nomenclature. Non-malignant tumors should be returned as local diseases under the respective systems to which the parts affected belong. The forms in which they occur should be named. The parts also should be specified in the order laid down at page 15.

(h.)—In cases of *Hæmoptysis*, every effort should be made to ascertain whether the Hæmorrhage is the result of changes due to *Phthisis Pulmonalis*. Should that prove to be the case, the disease ought to be entered under the latter heading—the Hæmoptysis being also noted as secondary to it, thus—*Phthisis Pulmonalis (a) (Hæmoptysis)*.

(i.)—The same rule applies to cases of *Dropsy* and *Paralysis* which should, if possible, be returned under the heading of the diseases on which those conditions depend. The *particular forms* of the conditions in question should also invariably be named, thus—*Cirrhosis of*

the liver ((a) Ascites)—Myelitis ((a) Paraplegia), &c. In every case of Paralysis, the parts suffering from loss of power should always be specified, if that has not already been made evident by the term employed in recording the form of disease.

(j.)—In cases where it may have been impossible, during life, to ascertain the exact nature of the disease, but where the *post-mortem* examination has at last made that clear, the disease should be changed by discharge “otherwise” under the disease first recorded, and re-admission and death under the true disease, *on the date on which the case proved fatal*—care being taken to note all those changes in the Admission and Discharge book on the medical history sheet, and on the weekly return of sick, stating, also, on each, that the appearances discovered on the examination of the body had enabled the diagnosis to be corrected.

Strict attention to this rule will give to the statistics of the causes of death in the army an amount of accuracy and value scarcely attainable in any other department of medical practice.

(k.)—*Cephalœa* or *Headache* must not be returned as a disease, but should be entered under the heading of the complaint of which it is a symptom. Neuralgia (brow ague), Dyspepsia, or *Febriçula* would probably cover most such cases.

(l.)—In *Valve Disease of the Heart*, the affected valve must invariably be specified. In *Aneurism*, also, the vessel implicated must be named.—In *Varicose Veins*, the locality of the disease must be given.

In *Hernia*, name the form, and whether double or single.

(m.)—*Odontalgia* must not be returned as a disease, but as Caries of the dental tissue, or under some form of tooth affection recorded at page 83, Sees. 366 to 372, of the official Nomenclature.

(n.)—In *Ostitis* and *Caries*, name the bones affected, and in *Synovitis* and *Dropsy of Joints* specify those attacked. *Ankylosis* must be returned under “Locomotive System,” and the particular joint specified.

(o.)—*Verruœ* must be returned as “Warts,” under the system to which the part affected may belong, the latter also being specified. *Condylomata* should be returned in a similar manner.

(p.)—*Debility* should be entered as *General Debility* under “Conditions,” and not, as is frequently done, under “General Diseases.”

(q.)—*Ebriositas* is no longer admissible—see Director General’s memo. on that subject. The conditions, other than Delirium Tremens, caused by drink, should be returned under *Febriola*, *Dyspepsia*, or whatever other form of disease the symptoms may indicate.

(r.)—In *Homicidal* and *Suicidal Injuries*, state their nature; and in deaths under “*Judicial*,” give the form, noticing also all such cases under remarks on the 4th page.

(s.)—In the cases of men admitted into hospital under the heading of some specific injury requiring subsequently a surgical operation by which the injured parts are removed, as, for instance, in the case of a gunshot wound necessitating amputation, the original nomenclature must be changed, by discharge “otherwise” under the heading first employed, and re-admission under that of amputation. In all such cases the parts removed must be specified.

Should space be wanting to note those particulars upon, they might either be written across the face of the return in red ink, or be recorded under the remarks on the 4th page. If, when noted on the last page, the entries were always made in red ink, the attention of the compiler would be at once attracted to them, and his labours thus considerably abridged.

(t.)—Short notes of *post-mortem* appearances in fatal cases must invariably be entered under the head of remarks on the 4th page. See also Section 10 (2nd), page 142.

19. When the last Friday of the year does not fall on the 31st December, the next Weekly Return of Sick must be closed on that date, so as to complete the statistics of the year. The days from the 1st January to the first Friday of the year, will, in that case, be the period for which the next Weekly Return must be made up.

20. In preparing the RETURNS OF SICKNESS OF WOMEN, Medical Officers will bear in mind, that, as *natural labour* is not recognized as a disease in the new Nomenclature, it should not be shown as such on any return of Sick.



*Abnormal labour*, however, should be returned under the corresponding heading laid down in the Nomenclature of Diseases; and, should recovery after natural labour have been protracted, from *Anæmia*, or *General Debility*, rendering the use of medical comforts necessary, the case must then be entered as a disease, under “*Anæmia*” or “*General Debility*” following labour.

The same rule is applicable to any other complaint following natural parturition.

Although cases of purely natural labour are not to be shown on any medical return, this will not prevent such cases being, when treated in hospital, returned on the monthly diet rolls sent to the Commissariat Department through the Deputy Inspector-General of the Circle.

21. MEDICAL CERTIFICATES of men of other corps treated in Regimental or Detachment Hospitals, and of all men admitted into Convalescent or other Depôt Hospitals, must be sent, on completion of the cases, to the medical officers of the corps to which the men belong.

In addition to this, certificates of all such men who may remain under treatment in the hospitals of other corps, or of convalescent or other depôts on the 31st December, should, in like manner, be forwarded without delay.

In those latter instances, also, it will of course be necessary to furnish second sets of certificates, on completion of the cases, in order to supply the requisite information as to the manner in which they were finally disposed of.

22. ADMISSION AND DISCHARGE BOOKS for *Men* are intended to last for only one year, and new ones must therefore be commenced on the 1st January—the old being retained till the last day of February for completion of the cases remaining on the former date. If completed before the end of February, they should be at once sent to the Deputy Inspector-General of the Circle, for transmission to Calcutta.

They must not be kept back, under any circumstances, beyond the 28th or 29th of February.

The cases still remaining in hospital at the end of February should be copied into the medical certificate book, in order that the necessary information as to their final disposal, may, in that way, be afterwards forwarded to Calcutta through the usual channel.



23. In order, however, that a *permanent record* of the statistics of each Regiment of Cavalry and Infantry, and of every Brigade and Battery of Artillery, may be at all times available, a book similar to the old form of admission and discharge book must be kept up, in addition to the present authorized one, in which shall be entered all the usual particulars of each case as to regimental number, rank, name, age, &c., with the letter M for married soldiers whose wives are present with them, the disease, and also a few short remarks sufficient to give such information as to the cause, nature, and result of the latter, as might be found useful should future reference become necessary.

24. AN ADMISSION AND DISCHARGE BOOK for *Officers*, and also one for *Women* and *Children*, must be carefully kept. Those will not require to be sent annually to the Inspector-General.

25. MEDICAL CASE BOOKS also must be kept for *Officers* as well as for *Women* and *Children*, and every case entered in any medical case book should be signed by the medical officer by whom the record was made.

26. DETAILED MEDICAL REPORTS, in *duplicate*, of all fatal cases among Officers, must invariably be forwarded to the Deputy Inspector-General of Hospitals of the circle, for transmission to the Inspector-General at SIMLA.

27. The entries in the DIARY OF MEDICAL OCCURRENCES should be carefully made in accordance with the instructions contained at para. 7, page 91, of the Medical Regulations.

This should invariably contain, in addition to other information, the notes of all sanitary inspections; and the records made there should form the ground-work of all future sanitary reports.

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VI.—*Annual Statistical and Sanitary Returns and Reports.*

28. The following returns and reports must be furnished annually by medical officers in charge of Brigades and Batteries of Artillery, and of Regiments of Cavalry and Infantry:—

1st.—Annual return of sick and wounded, W. O.	} <i>In triplicate.</i>
Form 298                    ...                    ...                    ...	

- 2nd.—Return of men of other corps, W. O. Form 298B.\*
- 3rd.—Classified return of invalids, W. O. Form 156.\*
- 4th.—Classified return of operations, W. O. Form 151B.\*
- 5th.—Nominal return of deaths, W. O. Form 298A.\*
- 6th.—Names of men of other corps who have died.\*
- 7th.—Return of venereal diseases, W. O. Form 825.\*
- 8th.—Return of men who have died, W. O. Form 197. *In duplicate.*
- 9th.—Supplement to the annual return, Local Form }  
       No. 16 ... .. } *Ditto.*
- 10th.—Annual return of cases of insolation, Local }  
       Form No. 13 ... .. } *Ditto.*
- 11th.—Annual return of venereal diseases and intem- }  
       perance, Local Form No. 14 ... .. } *Ditto.*
- 12th.—Comparative statement showing the sickness, }  
       &c., among married and unmarried men, } *One copy.*  
       Local Form No. 24... .. }
- 13th.—Annual nominal roll of invalids and statement }  
       of gain and loss in strength, Local Form } *Ditto.*  
       No. 25 ... .. }
- 14th.—Statement showing the number and ages of the }  
       children of the regiment on 1st April, Local } *One copy.*  
       Form No. 17. ... .. }
- 15th.—Report of medical transactions ... .. *In duplicate.*
- 16th.—No. 1 Annual sanitary report W. O. Form No. }  
       517 ... .. } *Ditto.*
- 17th.—Returns A and B to accompany No. 1 sanitary }  
       report (in lieu of the returns A to E), Local } *One copy.*  
       Form No. 15 ... .. }
- 18th.—(For Artillery) Memo. of non-commissioned }  
       officers and gunners and drivers, to accompany } *In triplicate.*  
       W. O. Form 298, Local Form No. 6. ... .. }

\* These six returns are now embodied in W. O. Form 298, in the order given above, and must therefore be rendered in triplicate.

N. B.—The Annual Return of Casualties, W. O. Form 823, not being required from medical officers in charge of corps, need not be furnished in future.

29. The attention of medical officers is specially called to the several foot-notes of the annual return, W. O. Form 298, and to the instructions on the endorsement having reference to the periods to be embraced in the return under different circumstances, as well as to the the following points :—

(a.)—The ANNUAL RETURN, W. O. Form 298, must show the sick of the *entire* corps, whether at head-quarters or on detachment, at convalescent or other depôts or on the march; and that, too, whether the absent portions of the corps are in Bengal, or in other presidencies.

In the case of a regiment divided into Wings however, each Wing must furnish a complete set of returns and reports, accounting at the same time for the sickness and deaths of all men of the corps attached to it, and whether present or absent, provided they are still within the bounds of the Indian Command.

(b.)—The deaths of men transferred from regiments serving in Bengal to corps stationed in Madras or Bombay, will, in future, should they happen within the limits of the former presidency, and before the men may have joined their new corps, be shown in red ink on the nominal return of deaths, W. O. Form 298A (now forming page 11 of the Annual Return, W. O. Form 298) of the corps from which they been transferred.

Should, however, the death have happened after the presidency boundary has been crossed, even if the man may not have joined his new corps, it will, in that case, be included only with the statistics of the corps to which the man may have been transferred, and which he have was on his way to join.

(c.)—It is believed that whilst the admissions, &c., of detachments are included in the regimental annual returns, their average daily sick is not likewise added to the daily sick rate of the regiment. As this would attribute to the force in the command a smaller daily sick rate than is actually due to it, medical officers will be careful to include in their annual returns, the average daily sick of all detachments that may have been absent from their corps in the course of the year, as well as of men at convalescent or other depôts.

(d.)—The average annual strength on page 4 of W. O. Form 298, and the total average strength in the supplement to the annual return,

as well as that on the return of venereal diseases and intemperance, must agree with the annual average strength at pages 2, 3 of W. O. Form 298.

(e.)—The strength on 1st January, shown on page 7, must correspond with that for the same date given on page 4 of W. O. Form 298.

(f.)—Deaths occurring “out of hospital” must invariably be shown separately from those which happen *in* hospital, and the cases of men dying *out of* hospital should never be shown as admissions on any return.

Treatment in hospital, although the man may not have been put on hospital diet, will entitle the case to be considered as an admission into and a death in hospital.

Deaths happening away from the corps to which the men belonged, whilst under treatment in a military hospital (camp or other), must be returned as having occurred *in* hospital.

Deaths of men treated in hospitals other than military ones must be returned as cases occurring *out of* hospital.

(g.)—The CLASSIFICATION OF INVALIDS shown at page 10 of W. O. Form 298, must agree with the corresponding information given at pages 2-3 of the same form.

(h.)—On the SUPPLEMENT TO THE ANNUAL RETURN, the annual average strength for each station occupied by the corps during the year, as well as for the periods it was on the march, together with that of all detachments, and of men at convalescent or other depôts, must be shown separately. The total of all those details should agree with the average annual strength given on pages 2, 3 of W. O. Form 298.

(i.)—In preparing the NOMINAL RETURN OF DEATHS, W. O. Form 298A (now included in the main return, 298), medical officers must be careful to enter both Christian and Surname in full, and in chronological order—the Surname following the Christian name.

(j.)—In preparing the ANNUAL RETURN OF VENEREAL DISEASES, W. O. Form 825 (now embodied at page 12 of Form 298), the following points must be carefully attended to :—

The column of admissions ought to show the number of *cases* without reference to the number of *men* in whom they occur, but the last



three columns ought to show the number of men who were admitted; for instance, if 29 men were admitted once, 7 twice, and 2 three times, the number of cases admitted would be 49, whilst the three last columns would show respectively 29, 7, 2, making a total of 38 *men* and 49 *cases*. It must therefore be obvious, that if any of the men have been admitted oftener than once, the sum of the last three columns ought not to agree with the numbers shown on the second column as cases admitted.

Attention is specially called, also, to Section 18, paras. (a) to (f) inclusive, pages 146 and 147.

(k.)—The GAIN AND LOSS RETURN is required of all Regiments, brigades, and batteries, as well as from convalescent and other depôts. In the case of depôts, however, only the ROLL OF MEN INVALIDED during the year will be necessary, but to that must be added a column showing the corps to which each man belonged.

This return should show all the men passed by invaliding committees in the course of the year, whether they may have already left the corps, or were still present with it, on the 1st January of the following year.

It will be prepared as soon as possible after the 1st January, and must be sent by Executive medical officers *direct* to Calcutta, without reference to the other annual returns.

(l.)—In future a STATEMENT (*single copy*, on the form supplied) SHOWING THE NUMBER AND AGES OF THE CHILDREN ON 1ST APRIL must be forwarded with the usual annual returns.

(m.)—Medical officers will be specially careful to note on the ANNUAL REPORT OF MEDICAL TRANSACTIONS, the manner in which cases remaining from last return as “not diagnosed,” were finally classified.

The annual report of medical transactions should be prepared in strict accordance with the instructions contained in Section 3, pages 107 to 111 of the Medical Regulations, information being given under every head enumerated therein, and in the order of succession in which they are laid down.

The report should be clearly written on foolscap with one-fourth margin, and it should always be docketed.



The report must be forwarded within the period prescribed for the transmission of all the annual documents, (see Section 34, page 157), but, should the returns be ready before the report has been finished, the former should, in that case, be sent on at once without waiting for the completion of the latter, which, however, should follow as soon after as practicable.

30. No. 1 ANNUAL SANITARY REPORT, W. O. Form 517, is required in *duplicate*. It must be borne in mind, in preparing this return, that it should include only the sickness, &c., of the portion of the corps actually present in the station, and that on no account should the sickness of detachments, or of men absent at convalescent or other depôts, be included with that of the Head-Quarters of a Corps. Every detachment in charge of a medical officer must supply its own sanitary report.

In preparing the No. 1 Sanitary Report the following points must be carefully attended to:—

Medical officers in charge of Head-Quarters of Corps should bear in mind that the totals of sickness and deaths occurring at head-quarters, as shown on the No. 1 Sanitary Report, must correspond with those entered on the supplement to the annual return as having occurred there—the two sets of returns embracing the same period.

Deaths happening out of hospital, and detailed at page 1 of the return, must neither be shown on the abstract at page 2, nor on return B at pages 14 to 18.

The meteorological table at page 5, must, where materials for that purpose are available, be filled up, and the relations which exist between the meteorological conditions and the health of the troops discussed, noticing, particularly, any connexion which can be traced between certain states of the atmosphere, and the prevalence of epidemic disease.

31. The MINOR RETURNS A to E have been discontinued, RETURNS A AND B having been substituted for them.

32. A medical officer, before leaving any corps, detachment, &c., of which he may have held charge, must hand over to his successor, a No. 1 Sanitary Report with the remarks filled up to date. He must also satisfy his successor, that, so far as the hospital records are concerned, the materials for compiling the various returns are complete in respect of the period of his medical charge.

The officer taking over the duties will be held responsible that this order has been complied with ; or, that the omission to do so is at once reported to the Deputy Inspector-General of the circle.

33. The No. 1 Annual Sanitary Report in *duplicate*, and *one copy* of the Returns "A and B" are to be sent by Medical Officers of Regiments, Wings and Detachments of Regiments, and Batteries of Royal Artillery, to their *Commanding Officers* FOR TRANSMISSION TO THE ADJUTANT GENERAL ; and to prevent mistakes as to the ultimate destination of those documents, medical officers *should mention specially* in the covering letters addressed to the Commanding Officer, that the documents are forwarded for such transmission (See Part AII., para. 1.)

34. The Annual Returns, and the Report of Medical Transactions, will be sent by Regiments of Cavalry and Infantry, and by Brigades of Artillery, to the Deputy Inspector-General of the circle, for examination and transmission to Calcutta, not later than the last day of February.

The only exception to be made to this rule is as regards the Gain and Loss Return which should, as soon as possible after the 1st January, be sent direct by Executive Medical Officers to the Office of the Inspector-General of Hospitals, British Forces, Calcutta, as has been already explained under Section 29 (*k*), page 155.

Medical Officers in charge of Detached Wings will send in their annual documents through the Head-Quarters of their Corps, except when the Wing is not in the same Deputy Inspector-General's Circle, in which case they will send them to the Deputy Inspector-General under whom they are serving.

Medical Officers in charge of Batteries of Artillery will send the sets of their Returns and Reports to the Deputy Inspector of the Circle, the *Returns by the 31st January*, and the Report of Medical Transactions by the end of February. The documents will be carefully examined by the Deputy Inspector-General of Hospitals, and will be despatched with as little delay as practicable, one set to the Surgeon of the Brigade, the others to the Inspector-General's office at Calcutta.

Surgeons of Brigades of Royal Artillery will make out complete sets of returns for the Brigade, and a Summary of the Reports received from Batteries, and will forward them to the Deputy Inspector-General

of Her Majesty's British Forces of the Circle in which they are serving, together with the Battery Returns, &c., from which the Brigade Returns have been compiled, for eventual transmission to the Inspector-General's Office, Calcutta.

When transmitting the annual documents, medical officers should invariably attach to the covering letter, a list of the documents, and state whether they are forwarded in triplicate, in duplicate or in original.

35. Administrative Medical Officers will, when transmitting the Annual Returns, &c., of their respective Circles, furnish a memorandum showing the dates on which those documents were received from the various Corps.

Should any of the above-mentioned sets of returns not have reached the Offices of Administrative Medical Officers by the fourth day after that which has been named as the limit which must not be exceeded in forwarding them, they will at once call for an explanation of the cause of delay, for the Inspector-General's information.

In justice, as well to medical officers, as to the public service, the Inspector-General is anxious to be able to have it in his power to distinguish between the officers who are earnest and diligent in the discharge of this very important part of their duties, and those who, by failing to display those qualities, are the means of impeding and delaying the preparation of the general statistics of the Army.

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*VII.—Transmission of Returns, &c., by Administrative Medical Officers in Envelopes of strong paper.*

36. As it is frequently found that the Weekly and other Returns of Sick forwarded to Calcutta from the offices of Administrative Officers arrive loose, owing to the paper of which the covers were made having been of too light a description, it is suggested that strong brown paper be employed for this purpose, as that is stronger than most of the ordinary kinds of paper generally used for envelopes.

*VIII.—Forms of Returns and Blank Books supplied by the Inspector-General's Office, Calcutta.*

37. Applications for blank Forms may be made direct to the Inspector-General's Office at Calcutta by Executive Medical Officers, who will address their requisitions as under :—

*The Officer in charge of*

*The Office of the Inspector-General of Hospitals,*

*Her Majesty's British Forces,*

CALCUTTA.

LIST OF BLANK FORMS SUPPLIED BY THE OFFICE OF THE INSPECTOR-GENERAL, CALCUTTA.

38. *Medical, Statistical, Sanitary, &c.*

1. (a.) Annual Return of Sick and Wounded, W. O. Form 298.

(b.)            "            "            of Men of other Corps, W. O. Form 298B.

(c.)            "            of Clasification of diseases of Invalids, W. O. Form 156.

(d.) Annual Classified Return of Operations, W.O. Form 151B.

(e.)            "            Nominal Return of Deaths, W. O. Form 298A.

(f.)            "            "            of Men of other Corps who have died.

(g.)            "            "            of Venereal Diseases, W. O. Form 825.

2. Nominal Return of men who have died, W. O. Form 197.

3. Supplement to Annual Return of Sick and Wounded, Local Form No. 16.

4. Annual Return of cases of Insolatiao, Local Form No. 13.

5. Annual Return of Venereal Diseases and Intemperance, Local Form No. 14.

6. Comparative Statement showing the sickness and mortality among the Married and Unmarried men, Local Form No. 24.

7. Annual Nominal Roll of Invalids and Statement of Gain and Loss in Strength, Local Form No. 25.



8. Statement showing the Number and Ages of the Children on 1st April, Local Form No. 17.
9. No. 1 Annual Sanitary Report, W. O. Form 517.
10. Returns A and B to accompany the Sanitary Report, (W. O. Form 517), Local Form No. 15.
11. Quarterly Return of Sickness and Deaths, Local Form No. 12.
12. Monthly Abstract Return of Sick, Local Form No. 4
13. „ Return of Women and Children, Local Form No. 5.
14. „ Sanitary Report, W. O. Form 463.
15. „ Return showing Distribution of Troops, W. O. Form 464.
16. „ Register of Admissions and Deaths from Upper and Lower Storeys of Barracks, Local Form No. 22.
17. Monthly Return of Medical Staff, with Distribution of Troops, &c., Local Form No. 7.
18. „ Return of the Expenditure of Stimulants and effervescing liquors, Local Form No. 10.
19. Weekly Return of Sick, W. O. Form 294A.
20. Station Weekly Sick Return (for Regiments), Local Form No. 2.
21. ditto (for Senior Medical Officer), Local Form No. 1.
22. Memorandum of Non-Commissioned Officers, Gunners and Drivers (*for Artillery*), Local Form No. 6.
23. Return showing the Strength, Admissions and Deaths while on the march, Local Form No. 19.
24. Morning State of Cholera (No 1), Local Form No. 20.
25. Daily Nominal Register of Cases of Cholera (No. 2), Local Form No. 21.
26. Casualty Report, Local Form No. 3.
27. Table of Hospital Diets.
28. Scale of Medicines for Regiments.
29. ditto for Detachments.



39. *Invaliding.*

- 30. Return of Invalids, W. O. Form 821.
- 31. Detailed Medical History, W. O. Form 891.
- 32. \*Return of Invalids passed by Annual Invaliding Committees assembled in the Circle during the season, Local Form No. 18.
- 33. †Form A, List of men rejected by Annual Invaliding Committee, Local Form No. 26.
- 34. †Form B, List of men passed by Annual Invaliding Committee, Local Form No. 27.
- 35. Return of Invalids en route, Local Form No. 28.
- 36. Statement of case of Insane to be invalided for Mental Disabilities, Medical Regulation Form.
- 37. Statement of case of Insane to be sent to Bhowanipore Lunatic Asylum, Local Form No. 29.

*N. B.*—The number of Invalids it may be proposed to bring before the Annual Invaliding Committee must invariably be intimated to the Inspector-General's Office, in order that the supply of Forms necessary for the number of men named may be at once forwarded. Care should also be taken to specify the numbers to be sent by the Overland route, as well as to mention how many it may be intended to despatch by long sea voyage, as in the absence of information on those latter points, it is impossible to calculate the number of Forms that will be required.

40. *For Active Service.*

- 38. Return of Wounds and Injuries received in action, W. O. Form 151A.

41. *Books.*

- 1. Admission and Discharge Book, Form G, for }  
     Head Quarters of Corps...                    ... } Size A.
- 2. Ditto for Wings of Regiments                    ...    ,, B.
- 3. Ditto for Batteries of Artillery and }  
     Detachments of Corps ...                    ... } ,, C.
- 4. Ditto Form K, for General and Depôt }  
     Hospitals ...                                    ... } ,, B.
- 5. Medical Case Book.
- 6. ,, Certificate Book.
- 7. Letter Book.

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\* For Administrative Medical Officers.

† For Presidents of Invaliding Committees.

8. Diary.
  9. Venereal Register.
  10. Vaccination and Small-pox Register for Regiments of Infantry and Cavalry ... } Large.
  11. Ditto for Batteries of Artillery and Detachments ... } Small.
  12. Recruit Register.
  13. Medical History Sheet Book.
  14. Guard Books (Large).
42. *For Administrative Medical Officers.*

1. Inspection Report, W. O. Form 824.

*N. B.*—Since the introduction of the new Form of Inspection Report, W. O. Form 824, the half sheet Form headed “Inspection Report,” hitherto attached to Inspection Reports of Corps by Administrative Medical Officers, as also the “Queries” to Executive Medical Officers to aid in completing those Reports, have become superfluous, and will therefore not be required in future.

2. Confidential Annual Report on Staff and Regimental Medical Officers, W. O. Form 645.
3. General Monthly Sanitary Report, Local Form No. 8.
4. Comparative Monthly Statement of the Expenditure of Stimulants, Local Form No. 11.
5. General Monthly Return of Medical Officers, W. O. Form 833.
6. Monthly Return of Medical Subordinates (New Form), Local Form No. 9.

*N. B.*—The information supplied by the amended Form of Monthly Nominal Disposition Return of Medical Subordinates having rendered the Quarterly Return unnecessary, the latter need not be furnished in future.

43. The two books named below are supplied by the Commissariat Department on requisition through the Deputy Inspector-General of the Circle.

- 1st.—Statistical Record for copies of the Station Weekly Returns.
- 2nd.—Blank Book for Sanitary Records of the Station.

44. Regimental Morning States are supplied by the Superintendent, Government Printing Establishment, Calcutta, on requisition through the Commanding Officer of the Corps.

W. M. MUIR,  
*Inspector-General of Hospitals,*  
*and P. M. O., British Forces, in India.*

PART A2.

1. No. 1.—Annual Sanitary Report, W. O. Form 517 (duplicate) and Returns A. and B. (single copies), should be forwarded before the 15th of January. (See Part AI., para. 33.)

Army Medical Department Circular,  
15th March, 1869.

2. In Annual Quarterly and Weekly Sick Returns, the names in the English list of the new nomenclature should be invariably used.

3. Commanding officers are to furnish medical officers with the information required for the completion of pages 13 and 14 of the Annual Sanitary Reports.

G. O. C. C.  
31st July, 1865.

4. A commanding officer is required to sign Sanitary Reports. If he does not agree with the medical officer, he is to record his dissent, stating his reasons, and to submit the whole case for the Commander-in-Chief's information. All reports made by medical officers, on sanitary points, to superior authority are to be submitted to commanding officers prior to despatch.

G. O. 268,  
16th November, 1867.

5. The attention of General Officers Commanding Divisions and Districts is directed to the necessity of expediting the return of General Monthly Sanitary Reports (submitted to them for countersignature), to administrative Medical Officers of circles.

G. O. 266,  
, 1870.

6. A Weekly Return—as annexed—of admissions into Hospital for venereal disease among European troops, will be furnished by the senior Medical Officer, British Troops, to the Sub-Cantonment Committee, who will forward it, with any remarks they may deem advisable, to the medical officer in charge of the Lock Hospital.

Circular No. 89, to Officers Commanding Divisions and Districts, 20th December, 1869.

*“ Statement shewing the admissions from Venereal affections” among the European Troops in the Cantonment of \_\_\_\_\_ during the week ending Friday \_\_\_\_\_*

Station.	Regiment.	Strength.	Number of admissions from primary venereal affections during the week.	Number remaining last Friday.	Total Primary affections.	Remarks.

*Deputy Inspector-General of Hospitals, or  
Senior Medical Officer, British Troops.*

PART B.  
7. List of Hospital Returns, Reports, &c., &c., showing their Distribution.

NAMES OF RETURNS, REPORTS, &c.	No. of Copies.	Number of the Return.	From whom the Blank Forms are obtained.	To whom sent.	When sent.	By whom prepared.
<i>Daily.</i>						
1 Daily Abstract of Diets ... ..	1	Form No. 3 ...	Commissariat	Purveyor	Every morning	Apothecary
2 Morning Sick State ... ..	1	W. O. F. 986...	Government Printing Press, Calcutta, through C. O.	Orderly Room	Ditto	Hospital Sergeant.
Requisition on the Purveyor of Corps for articles of bedding and clothing to be changed.	2	Printed Form. See Sec. XXIV, para. 3.	Commissariat	Purveyor	Weekly or oftener, if required.	Apothecary.
<i>Weekly.</i>						
1 Return of Admissions from Venereal affection	1	See Sec. XLIX., A2, para. 6.	Prepared	Sub. Cantonment Committee	Every Friday	Hospital Sergeant.
2 Weekly Return of Sick ... ..	3	294A	I. G.'s Office, Calcutta	Dy. I. G. of Circle	Every Saturday	Ditto.
3 Station Weekly Return of Sick ... ..	2	Form No. 2 ...	Ditto	Officer Commanding the Station.	Ditto	Ditto.
<i>Monthly.</i>						
1 Monthly Sanitary Report ... ..	1	W. O. F. 463...	I. G.'s Office, Calcutta	Dy. I. G. of Circle	On last Friday of month.	Hospital Sergeant.
2 Correspondence on Sanitary Recommendations	3	Copies	Prepared	Ditto	Ditto	Ditto.
3 Return showing the distribution of Troops and of the Sick.	1	W. O. F. 464...	I. G.'s Office, Calcutta	Ditto	Ditto	Ditto.
4 Return of Regimental Medical Staff with distribution of Troops.	1	Local Form No. 7.	Ditto	Ditto	Ditto	Ditto.
5 Abstract Return of Sick ... ..	1	Form A	Ditto	Ditto	1st of every month	Ditto.
6 Monthly Return of sick women and children ...	1	Form B.	Ditto	Ditto	Ditto	Ditto.
7 Diet Roll ... ..	2	Form No. 5 ...	Commissariat	Ditto	Ditto	Apothecary.
8 Diet Sheets ... ..	2	Form No. A ...	Ditto	Ditto	Ditto	Ditto.
9 Statement of expenditure of Wines, &c ... ..	1	Local Form No. 10.	I. G.'s Office, Calcutta	Ditto	Ditto	Ditto.
10 Muster Roll and Pay List of Subordinate Medical and Fixed Establishment.	2	Bengal Form No. 36.	Paymaster of Corps	Paymaster of Corps	On last day of each month.	Ditto.
11 Stoppage Roll of Sick ... ..	2	Form No. 38 ...	Ditto	Ditto	1st of every month.	Ditto.
12 Monthly Nominal Disposition ... .. Return of Subordinate Medical Officers.	1	Manuscript ...	Prepared	Dy. I. G. of Circle	Ditto	Ditto.
13 Numerical Return and Pay Abstract of Temporary Punkah and Tattee Establishment.	2	Bengal Form No. 176	Paymaster of Corps	Paymaster of Corps	Ditto	Ditto.



List of Hospital Returns, Reports, &c., &c., showing their Distribution.—(Continued.)

NAMES OF RETURNS, REPORTS, &c.	No. of Copies	Number of the Return.	From whom the Blank Forms are obtained.	To whom sent.	When sent.	By whom prepared.
<i>Monthly.—(Continued.)</i>						
14 Leech Certificate ... ..	2	Form No. 2 C.	Commissariat	Dy. I. G. of Circle ...	1st of every month.	Apothecary.
15 Tinning Certificate ... ..	2	Form No. 2 B.	Ditto	Ditto	Ditto	Ditto.
16 Certificate for Bullocks for Ambulance Cart...	2	Manuscript ...	Prepared	Purveyor	Ditto	Ditto.
17 Compensation for House Rent for Inferior Quarters for Medical Subordinates, Bills and Certificate.	One of each.	Ditto	Ditto	Ex. Engineer	Ditto	Ditto.
18 Compensation in lieu of Rations for Apprentices, Bill and Certificate (in one.)	2	Form No. 5 C.	Commissariat	Paymaster of Corps	Ditto	Ditto.
19 Compensation in lieu of Hospital Nurse's Beer, Bill and Certificate (in one.)	2	Manuscript ...	Prepared	Ditto	Ditto	Ditto.
20 Compensation in lieu of Hospital Diet for Hospital Sergeant, Bill and Certificate (in one.)	2	Ditto	Ditto	Ditto	Ditto	Hospital Sergeant.
21 Oil Certificate	2	Form No. 2 A.	Commissariat	Purveyor	Ditto	Apothecary.
22 Register of Admissions and Deaths from upper and lower storeys of Barracks.	2	Local Form No. 22.	Office of I. G. of Hospitals, Calcutta.	Dy. I. G. of Circle	Ditto	Hospital Sergeant.
<i>Quarterly.</i>						
1 Bazar Medicine Indent ... ..	2	Form No. 1 ...	Commissariat	Dy. I. G. of Circle...	1st Jan., 1st April, 1st July, and 1st Octr. of each year.	Apothecary.
2 Dhooanah and Charcoal, &c., Indent ... ..	3	Manuscript ...	Prepared	Ditto	Ditto	Ditto.
3 Indent for Hospital Necessaries ... ..	2	Form No. 2 ...	Commissariat	Ditto	Ditto	Ditto.
4 Quarterly Return of Sickness and Deaths	1	Printed Form	I. G.'s Office, Calcutta	Ditto	Ditto	Hospital Sergeant.
5 Quarterly Nominal Disposition Return of Subordinate Medical Officers.	1	Manuscript ...	Prepared	Ditto	Ditto	Apothecary.
<i>Half-yearly.</i>						
1 Half-yearly Return of Surgical Instruments and Hospital Necessaries.	1	Printed Form	Medical Depôt	Examiner of Medical Accounts.	1st April and 1st Octr. of each year.	Apothecary.
2 Half-yearly Indent for Medicines and Instruments. See G. O. 177, 14th July, 1870.	1	Ditto	Ditto	Dy. I. G. of Circle	1st February and 1st August of each year.	Ditto.
<i>Annual.</i>						
The Annual Returns required in addition to the Annual Report (duplicate) are noted in Section XLIX, Part A1, para. 28, &c.						
<i>Return of Men for Change of Climate to the Hills.</i>						
Nominal Roll of Men for the Hills ... ..	1	See Sec. XII...	Prepared	Adjutant	When Men are invalided to the Hills	Hospital Sergeant.
Return of Men for the Hills ... ..	2	.....	Ditto	With the Men to the Hills	Ditto	Ditto.

	England { Via Bombay, 5. Leve in India, 3.	Manuscript Ditto	Prepared Ditto	See Section XXXVII. .....	When required Ditto	Hospital Sergeant. Ditto.
<i>Invalid Return of Officers.</i>	...	...	...	...	...	...
Detailed Medical History	...	...	...	...	...	...
Medical Certificate	...	...	...	...	...	...
<i>Invalid Returns.</i>						
See Section XLIX., Part A1, para. 39, and Section XXXVI.	...	...	...	...	...	...
<i>List of Occasional Forms.</i>						
1 Morning State of Cholera, No. 1	3	Form No. 20	I. G.'s Office, Calcutta	See Section IX.	When required	Hospital Sergeant.
2 Daily Nominal Register of cases of Cholera, No. 2.	3	Form No. 21	Ditto	Ditto	Ditto	Ditto.
3 Progress Report of Cholera	2	See Sec. IX., paras. 60 to 61	Ditto	Ditto	Ditto	Ditto.
4 Admissions from Cholera from upper and lower storeys of Barracks.	2	See Sec. IX.	Ditto	Ditto	Ditto	Ditto.
5 Special Report on disappearance of Cholera	3	Manuscript	Prepared	Adjutant	Ditto	Ditto.
6 Death Report	1	Form No. 3	I. G.'s Office, Calcutta	Dy. I. G. of Circle	Ditto	Ditto.
7 Casualty Report	1	Manuscript	Prepared	Adjutant	Ditto	Ditto.
8 Officers' Sick State	1	Ditto	Ditto	Ditto	Ditto	Ditto.
9 Officers' Duty Report	2	Form No. 6	Commissariat	Dy. I. G. of Circle	Ditto	Apothecary.
10 Indent for Medical Servants	2	Form No. 6 A.	Ditto	Ditto	Ditto	Ditto.
11 Indent for extra Servants	2	Form No. 6 B.	Ditto	Ditto	Ditto	Ditto.
12 Indent for Furniture	3	Form No. 8	Ditto	Ditto	Ditto	Ditto.
13 Indent for Carriage	2	Form No. 8 A.	Ditto	Ditto	Ditto	Ditto.
14 Indent for extra Carriage	2	Form No. 8 B.	Ditto	Ditto	Ditto	Ditto.
15 Certificate for extra Carriage	2	Form No. 8 C.	Ditto	Ditto	Ditto	Ditto.
16 Review Certificate	2	Form No. 3	Ditto	Ditto	Ditto	Ditto.
17 Indent for Miscellanies	2	Manuscript	Prepared	Ditto	Ditto	Ditto.
18 Indent for Ice	1	No. 7	Ex. Engineer	Barrack Master	Ditto	Hospital Sergeant.
19 Requisition for petty repairs, D. P. W.	1	Bengal Form No. 175.	Paymaster of Corps	Orderly Room	Ditto	Ditto.
20 Particulars of Letters despatched or Indents satisfied.	1	Printed	I. G.'s Office, Calcutta	Kept as Office Record	.....	.....
21 Scale of Medicines for Regiments	1	Ditto	Ditto	Ditto	Ditto	.....
22 Scale of Medicines for Detachments	1	Ditto	Ditto	Ditto	Ditto	.....
23 Table of Diets	1	Printed Form	Commissariat	Purveyor	Ditto	Apothecary.
24 Requisition on the Purveyor for Bedding, Clothing, and Miscellanies.	3	Manuscript	Prepared	Dy. I. G. of Circle	Ditto	Ditto.
25 Statement of character and service of Medical Subordinates when transferred from one Regiment to another.	1	Local Form No. 19.	I. G.'s Office, Calcutta	Idem	Immediately after the March.	Hospital Sergeant.
26 Return showing the strength, admissions, and deaths on the March.	1	See Sec. XLIX., part A1, para. 10 (5th).				

8. All requisitions for medical stores and supplies are, in the first instance, to be submitted to the Deputy Inspector-General of Hospitals, or, if the case is an urgent one, to the senior medical officer of the station, for approval and check.

G. O. 588, 1864.

9. Indents for medical stores must be forwarded to medical depôts on the 1st February and the 1st August of each year.

G. O. 177,  
14th July, 1870.

10. Half-yearly returns of surgical instruments and hospital necessaries are to be sent to the office of the Examiner of Medical Accounts on the 1st April and the 1st October of each year.

G. O. 78,  
24th March, 1867.

PART C.

11. *List of Books in daily or occasional use in Regimental Hospitals, and of Records.*

NAMES OF BOOKS.	Number of the Book.	From whom obtained.	By whom kept.
Medical Histories Book ... ..	1	I. G.'s Office, Calcutta	Hospital Sergeant.
Admission and Discharge Book of Men ...	2	Ditto ... ..	Ditto.
Do. Do. Women and Children	3	Ditto ... ..	Ditto.
Do. Do. Officers ... ..	4	Ditto ... ..	Ditto.
Do. Do.—Office Copy ... ..	5	Ditto ... ..	Ditto.
Medical Case Book ... ..	6	Ditto ... ..	Ditto.
Daily Diary ... ..	7	Ditto ... ..	Ditto.
Morning Sick State—Office Copy ... ..	8	Extra Copies obtained from C. O.	Ditto.
Medical Certificate ... ..	9	I. G.'s Office, Calcutta	Ditto.
Letter Book ... ..	10	Ditto ... ..	Ditto.
Circular Book ... ..	11	Commissariat ... ..	Ditto.
Weekly Return Book ... ..	12	Ditto ... ..	Ditto.
Monthly and Quarterly Returns & Reports...	13	Ditto ... ..	Ditto.
Annual Returns and Report ... ..	14	Ditto ... ..	Ditto.
Vaccination and Small-Pox Register...	15	I. G.'s Office, Calcutta	Ditto.
Register of Recruits ... ..	16	Ditto ... ..	Ditto.
Venereal Register ... ..	17	Ditto ... ..	Ditto.
Officers' Visiting Book ... ..	18	Commissariat ... ..	Ditto.
Chaplain's Visiting Book ... ..	19	Chaplain of the Station	Ditto.
Stoppage Roll ... ..	20	Commissariat ... ..	Ditto.
Medical Case Book for Officers ... ..	21	I. G.'s Office, Calcutta	Ditto.
Medical Case Book for Women and Children	22	Ditto ... ..	Ditto.
Guard Book ... ..	23	Ditto ... ..	Ditto.
Medical History Sheet Book ... ..	24		
See also Section XLIX., Part A1, 41.			
<i>Records.</i>			
Daily Nominal Diet Roll Book ... ..	A	Commissariat ... ..	Apothecary.
Nominal Diet Roll ... ..	B	Ditto ... ..	Ditto.
Monthly Indent ... ..	C	Ditto ... ..	Ditto.
Quarterly, Half-yearly, and Annual Indent	D	Ditto ... ..	Ditto.
Quinine Register ... ..	E	Ditto ... ..	Ditto.
Prescription Book ... ..	F	Ditto ... ..	Ditto.

12. In all stations where there are European troops, the senior Medical Officer, British Forces, will as soon as possible procure, from the Commissariat Department, a blank book, in which he will enter a copy of the station weekly returns of sick, as furnished by him to the Station Military Authorities. This book will always remain, in the possession of the senior Medical Officer, British Troops, and will be handed over by him to his successor, on the occasion of any change.

G. O. C. C.

20th October, 1865.

13. A duplicate copy of the admission and discharge book is to be kept in all Military Hospitals, as an hospital record.

Departmental Circular  
5324, 7th June, 1865.

14. The following books should be kept up in every Battery Hospital:—

- Admission and Discharge Book (size C.)
- Medical History Book.
- „ Certificate Book.
- Venercal Register.
- Recruits' Register, small.
- Medical Case Book.
- „ History Sheet Book.
- Letter Book and Guard Book.
- Diary.
- Vaccination and Small-Pox Register, small.

Procurable from the office of the Inspector-General of Hospitals, British Forces, Calcutta.

Books for office copies of weekly, } Procurable from the  
annual, or other sick and sanitary reports. } Commissariat.

Surgeons in medical charge of cavalry and infantry regiments will in all cases be required to satisfy themselves that the hospitals of detachments of these corps are provided with—

- Admission and Discharge Book (size C.)
- Case Book.
- Medical Certificate Book.
- Diary.
- Vaccination and Small-Pox Register, small.
- Venercal Register.
- Guard Book.

Letter Books and register for copies of sick and sanitary returns and reports.

G. O. 186,  
3rd September, 1866.  
end of each year.

15. The *Indian Medical Gazette*, which is supplied to regiments, should be bound at the

The number of volumes supplied to detachments of artillery should not be removed from stations.

Those belonging to regiments leaving India should be transferred for the use of the relieving regiment.

NOTE.—The list of Hospital Returns, &c., &c., Part B., para. 7, and Part C., 11, were arranged, under general instructions from myself, by Mr. G. R. Jenkins, Apothecary, 103rd Fusiliers.

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## SECTION L.

## SANITARY.

Adjutant-General's Circular Memo., 28th April, 1868.

1. Under the advice of medical officers, men should be allowed to sleep in the open verandahs of barracks during the hot and dry season of the year.

2. When the number of nights in bed enjoyed by the non-commissioned officers and rank and file of any corps falls short of five, a special report will at once be made by the Brigadier General or other Officer Commanding the Station, to the Major General Commanding the Division.

G. O. 50,  
15th March, 1870.

3. Movements of troops to distant stations between the 1st April and the 20th October are not authorized, without special sanction from Army Headquarters, through the Quarter-Master General.

G. O. 198,  
5th July, 1869.

4. During the hot weather, *i. e.*, from the 15th April to the 15th October, the men of British Regiments serving in the Bengal Presidency may be allowed to leave off the cross-belt and pouch when mounting guard, and wear the waist-belt and ball bag only.

G. O. 85,  
25th April, 1870.

5. The owners of houses in military cantonments should be requested to fill up all such holes in the compounds in which they are situated, as the Local Board of Health may consider it necessary to have filled up.

G. O. C. C.  
10th March, 1865.

A register of all deaths in military cantonments, whether European or native, is to be kept by the Cantonment Magistrate, or, when there is none, by the Station Staff Officer.

G. O. 199,  
30th August, 1867.

A weekly statement of such registration will be prepared by the Cantonment Magistrate or Station Staff Officer, who will forward a

copy to the sanitary officer, for the information of the cantonment committee.

6. The head of any house or family in which a death may occur shall within 24 hours report, or cause to be reported, to the Cantonment Magistrate, or in his absence to the Officer Commanding the Station, the fact of such death, and also the cause to which death is believed to have been due.

7. (a.)—*Vaccine Lymph.* When that supplied is of bad quality, and satisfactory results do not obtain, a report should at once be made to the Deputy Inspector-General of the circle, or to the Superintendent of Vaccination, by whom fresh supplies will be forwarded in succession, till the desired effect is produced.

Departmental Circular  
Sanitary 417  
M. A.,  
31st January, 1865.

(b.)—The most appropriate date to select as the one in which vaccination should be put a stop to in Bengal, is the 15th March. With much heat in the end of February, unless the greatest care is taken, vaccination, even in the first days of March, is not satisfactory. While if there are frequent storms, and great care is taken in selecting virus, very perfect vaccination can be secured during the whole of March.

It is however desirable to practice vaccination, at any season, in the presence of small-pox.

8. Duties strictly connected with British troops, whether professional, economic or sanitary, will be vested solely in the administrative or senior officers of the British Medical Service; those connected with the Native Army, and bodies of men belonging to it, in the senior medical officers of the Indian Service.

No returns or reports connected with such duties will consequently be required by officers of one Service from those of the other, excepting the Inspector-General's, British Forces, return of medical subordinates, sent to the Inspector-General, Indian Medical Service.

The senior medical officers' of the two Services will act as the sanitary officers and advisers of the Officer Commanding the Station, in all matters relating to their respective departments or duties, and they will have the entire superintendence of the lines, bazars, and establishments attached to them, of the regiments belonging to their respective Services.

## SECTION LI.

## SUBORDINATE MEDICAL DEPARTMENT.

1. The subordinate Medical Department is under the control of the Inspector-General of Hospitals, Indian Service, who transfers to the control of the Inspector-General, British Service, all who are employed with British troops.

G. G. O.  
6th June, 1867.

2. In view to facilitate the efficient working of the subordinate Medical Department, the Commander-in-Chief, under instructions from Government, directs officers in command of Divisions, Districts, Brigades, and Stations to carry into effect at once all instructions from the Head of the Medical Department to senior medical officers, regarding the removal of medical subordinates, unless the Deputy Inspector-General of Hospitals of the circle in which they are serving, represent, that in consequence of sickness among the members of the Department, or a sudden emergency having arisen elsewhere, since the date of his last monthly return, it is impracticable to comply with the instructions received.

G. O. C. C.  
24th January, 1865.

3. The provisions of G. G. O. 773 of 1864 apply to medical subordinates in common with other warrant officers, and their removal from one point to another will be effected without any avoidable delay.

Idem.

4. It is the duty of medical officers holding charges to bring all matters of discipline, connected with the medical subordinates attached to their corps, *in the first instance*, to the notice of their commanding officers, under whose immediate orders the medical subordinates are serving, and who are held responsible for the discipline of all under their command.

G. O. 123,  
1st June, 1870.

It is necessary that this course should be followed, as the superior medical authority on the spot is powerless to take action in such cases.

5. Warrant officers and hospital apprentices, not being liable to imprisonment or corporal punishment, by sentence of Courts-Martial, are not to be medically examined, with a view to their capacity for enduring such punishment previous to their trial.

G. O. 29,  
27th February, 1866.

6. Warrant officers not holding honorary commissions, are to salute officers holding commissions from Her Majesty.

G. G. O. 1105,  
21st November, 1868.

7. In all cases where medical subordinates make applications for promotion, transfer, furlough, or other such indulgence, or for permission to resign the Service, administrative medical officers will supplement such applications with expressions of opinion upon the conduct and qualifications of such applicants. They will also state whether, should the favor solicited be granted, the duties of the subordinate could be temporarily provided for without inconvenience to the Service.

Departmental Circular  
no. 19th September, 1867.

8. The subordinate medical establishments at the three Presidencies will be divided into two classes :

G. G. O. 550,  
5th June, 1868.

The first designated the Apothecary Class, for general employment with European troops, hospitals, depôts, &c.

The second designated the Hospital Assistant Class for general duty with native troops, &c.

9. The Apothecary Class will consist of Senior Apothecaries (in the proportion of one-tenth to the effective establishment of Apothecaries.)

Idem.

Apothecaries.	{	1st class (after 5 years' service as Apothecary.)
		2nd class (below 5 years' service as Apothecary.)
Assistant Ditto	{	1st class (after 5 years' service as Assistant Apothecary.)
		2nd class (below 5 years' service as Assistant Apothecary.)

Passed Hospital Apprentices.

Hospital Apprentices.



10. All these grades, with the exception of Hospital Apprentices, will hold the rank of warrant officers, and receive warrants which will give them a rank above all non-commissioned officers.

Idem.

11. Passed Hospital Apprentices, when in subordinate medical charge of troops, will have temporary warrant rank while so employed. (See also Section III., para. 4.)

Idem.

12. The regimental and other military establishments in the three Presidencies will be the same, viz. :—

For a European Regiment of Cavalry or Infantry, or a large Depôt or Sanitarium equal to a regiment—

1 Apothecary.		1 Passed Apprentice.
1 Assistant Apothecary.		1 Hospital Apprentice at least, or more if available.

G. G. O. 269,  
5th March, 1869.

13. The establishment of a Brigade of Artillery is—

1 Apothecary.		1 Hospital Apprentice not passed.
1 Passed Hospital Apprentice.		

Idem.

14. For a Battery of Artillery, or a small Depôt or Sanitarium—

One Assistant Apothecary.

G. G. O. 550,  
5th June, 1868.

15. For a Garrison or Cantonment Hospital, or Presidency Medical Store Depôt—

1 Apothecary.		1 Assistant Apothecary.
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Idem.

16. Head-Quarters of the Corps of Sappers and Miners—

One Apothecary or Assistant Apothecary.

For Provincial Medical Store Depôts—

One Apothecary.

17. The future pay of the members of the Apothecary Class will be a consolidated sum, to cover all expenses except those specially noted below.

Idem.



18. Quarters, Furniture—See Section XLV., para. 7, and Section XXIX., para. 3.

19. Hospital Apprentices will receive a ration allowance of Rs. 10 (see Section I., para. 2A) per mensem when not dieted in the hospital to which they may be attached, or in the Medical College ;—this latter grade will also be supplied with the usual allowance of bedding and three suits of uniform clothing annually :

One for cold weather, and two for summer wear, free of cost (see para. 30.)

The bedding consists of :—

Letter 4670, 7th November, 1868, from Officiating Commissary General to the Deputy Commissary General, Upper Circle.	1st year ... 2 sheets, 1 blanket, 1 quilt, 1 carpet.
	2nd year... 1 sheet, 1 quilt.
	3rd year ... Same as first year, and so on each alternate year.

20. Dress of medical subordinates, G. O. 242, 23rd August, 1869.

21. The consolidated monthly rates of pay will be as follows :—

Senior Apothecary	...	...	...	Rs.	400
Apothecary	{	Above 5 years service in that grade	„	200	
		Below 5 years service in that grade	„	150	
Assistant Apothecary	{	Above 5 years service in that grade	„	100	
		Below 5 years service in that grade	„	75	
Passed Hospital Apprentice	...	...	„	50	
Hospital Apprentice, 1st year	...	...	„	16	
Ditto	2nd year	...	„	20	
Ditto	when in College, 1st year	...	„	20	
Ditto	ditto	2nd year	„	25	
Ditto	ditto	3rd year	„	30	

One-fourth of the above salaries to be forfeited during absence, whether on general leave or medical certificate.

21. In addition to the ordinary rates of pay, a field allowance of Rupees (30) thirty per mensem will be granted to all the medical warrant grades when marching or in the field.

Idem.

22. A similar amount will be granted as a staff or employment allowance to those grades, when senior with, or in subordinate medical charge of the hospital of a British regiment, or detachment of British troops, or of a battery of artillery, or a depôt or sanitarium, or when attached to a general hospital, or medical store depot.

Idem.

23. Warrant officers appointed to act for those of a higher grade who may be on furlough, shall receive the half of the aggregate allowances of the absentees added to half of the aggregate of their own allowances.

G. G. O. 207,  
19th February, 1869.

24. Warrant officers shall only be entitled to furlough on sick certificate. The furlough shall be for two years, and half of aggregate Indian allowances will be drawn during the period. Any leave on sick certificate not exceeding one year, granted in extension of the two years, or leave taken within less than three years, from the date of last return to duty, will be on English furlough pay only.

Idem.

25. The same rules as regards the allowances of warrant officers on leave *in India*, as also as regards the allowances of those acting for such absentees, are in force as apply to commissioned officers.

G. O. 43,  
10th March, 1870.

26. No stoppage is to be made from the *pay* of a warrant officer on account of arrest, except under the sentence of a competent court, unless any portion of his emoluments be of the nature of staff pay, when the rule noted in the following paragraph will be acted on.

G. O. 59,  
3rd March, 1869.

27. In the medical warrant grades, the staff allowance should be given to the warrant officer performing the duty when he falls into the charge, by the senior being removed, or being on leave of absence, or incapacitated by being under arrest, but not during short absences (say for less than one month) on leave, or by reason of sickness.

G. O. 271,  
14th September, 1869.

28. The Europe rate of furlough pay for Assistant Apothecaries has been fixed at £40 per annum.

G. G. O. 433,  
19th April, 1870.

29. Pensions—G. O. 152, 20th June, 1870.

Pensions to Widows—G. O. 54, 3rd March, 1869.

30. *Compensation for clothing for Hospital Apprentices.* No claims beyond twelve months shall on any account be admitted by Government. Should any claims of longer date be established, the same will be admitted and charged against the officer through whose neglect clothing had neither been supplied, nor compensation in lieu thereof obtained. See Section I., para. 2*b*.

31. When a medical subordinate is transferred from one corps to another, the form noted in Section XLIX B., <sup>no.</sup> para. 25, must be completed and forwarded through the Deputy Inspector-General of the circle to the medical officer under whom the subordinate is about to serve.

32. Committees for examination of Medical Subordinates in Native Languages, shall be composed of two passed officers and a medical officer of standing.

33. Rules for the guidance of Committees of examination of candidates for admission into the Subordinate Medical Department :—

(*a.*)—Committees composed of three medical officers, and an officer who has passed in the higher standard as Interpreter, are to be assembled half yearly, *viz.*, on the 15th April and 15th October, at the undermentioned stations :—

Head-Quarters of Divisions.

Head-Quarters of Independent Brigades or Commands.

Head-Quarters of Deputy Inspectors-General of Hospitals of circles.

(*b.*)—Candidates will be required to produce the following documents, on presenting themselves for examination :—

Baptismal Certificate. | Character Certificate.

(*c.*)—Committees will forward the proceedings, *in duplicate*, of passed candidates, in the annexed form, *direct to the Inspector-General of Hospitals, Indian Medical Department.*

(d.)—Any informality in the examination of candidates in the foregoing rules, will vitiate the proceedings of Examination Committees.

Station.

Date.

Proceedings of the half-yearly committee assembled on the———, for the purpose of examining candidates for admission into the Subordinate Medical Department.

PRESIDENT.

Surgeon \_\_\_\_\_

MEMBERS.

Assistant Surgeon \_\_\_\_\_

Staff Assistant Surgeon \_\_\_\_\_

INTERPRETER.

The Committee having assembled, proceed to examine the under-mentioned candidate:—

W. Jones. Baptismal and Character Certificate appended.

The Committee after examination consider the lad physically fit for the active duties of the Subordinate Medical Department.

His knowledge respecting the English Language is found to be—

In Orthography ... .. Very good.

Meaning of words ... Good.

Writing from dictation ... Good.

His knowledge of Arithmetic, as far as “Proportion,” is good.

The Committee are of opinion that Candidate Jones is qualified for admission into the Subordinate Medical Department.

A. B., President.

C. D., }  
E. F., } Members.

INTERPRETER,

Attending Committee.

Certified that G. O. 220, dated 20th August, 1870,\* and G. O. 289 of the 15th October, 1870, were duly laid before the Committee.

(Signature of the President.)

\* See Section X., para. 12.

The instructions contained in paras. 32 and 33 were issued too late, to admit of their insertion in Section X, “Committees;” they contain the most recent instructions on the subjects to which they refer.

Result of the half-yearly examination of candidates for admission to the Subordinate Medical Department.

Station——— Date———

Number.	Name.	Nature of Testimonials.	Orthography, &c.	Writing from Dictation.	Arithmetic.	Hindoostanee.	REMARKS.
1	W. Jones ...	Good.	Very good.	Good.	Good.	Good.	Qualified for admission to the Subordinate Medical Department.

A. B., *President.*

C. D., }  
E. F., } *Members.*

G. H., *Interpreter,*

*Attending Committee.*

34. A medical subordinate attaining the age of 55 years must retire on a pension, unless he can produce a medical certificate of fitness for further service; in the latter case, he may continue to serve for the further period of three years only.

Letter from Secretary to Government of India, Military Department, to Secretary to Government of Madras, No. 737, 31st August, 1870.

NOTE.—Further instructions regarding subordinate medical officers will be found, in other Sections, along with those for medical officers.



## SECTION LII.

## TATTIES.

1. Tatties are in future authorized to be used at night, on the recommendation of local Medical Authorities, in barracks, hospitals, and cells, whenever the thermometer at 9 p. m. indicates a temperature of 95 Farenheit, or more: provided the wind is not from the east, when Tatties become not merely inoperative, but deleterious.

G. O. 24,  
23rd August, 1869.

The establishment for working Tatties at night is only to be employed when a temperature of 95° is actually reached, its services being dispensed with as soon as the temperature for two consecutive nights falls below that degree.

It will generally be found more convenient to make an arrangement with the regular day establishment to perform the extra work at night, a proportionate increase being made to their ordinary wages.

2. Tatties' and watering establishments for prison cells may be provided on the recommendation of the principal medical officers of stations, concurred in by the Deputy Inspectors-General of Hospitals of circles.

G. O. 48,  
10th March, 1866.

3. The number of Tatties to be furnished to any building is restricted to half the number of apertures in it (doors and windows). One bhcestie is allowed to every three Tatties, and one coolie to every two; also the necessary number of mate bhcesties and mate coolies, according to local custom, and bullocks with leather bags for filling reservoirs.

P. W. Code, 1858,  
Chap. xx., Sec. V., page  
10.

The date of authorizing the entertainment of, and discharging establishments for watering Tatties should be notified in general orders.

## SECTION LIII.

## TENTS.

1. Officers attached to bodies of Invalids and time-expired men who may have to proceed, by ordinary marches, over some portion of their journey, to ports of embarkation, may use Staff Sergeants' Tents, without charge, should such be available, without any deduction being made from their pay on account of the very temporary accommodation thus afforded.

G. O. 322,  
21st October, 1868.

2. In any case in which officers may obtain Tents or other unauthorized articles from magazines, &c., without sufficient grounds, they will be liable to be charged the full value of them.

G. O. 100,  
23rd May, 1866.

3. Tents used by cholera or small-pox patients—See Sections IX. and XV.

4. Hospital Tents (six privates, double-poled) for the use of the sick of a regiment on the march, also a Tent or Tents for the use of the sick of detachments, are provided by the Quarter-Master, on requisition by the surgeon; likewise one Pâl, for use as a Latrine Tent.

5. A European Privates' Tent for a Female Hospital is to be furnished, when required, from the regimental camp equipage.

G. O. C. C.  
10th July, 1865.

6. A Staff Sergeants' Tent is authorized for the Hospital Nurse of a British regiment, provided she is not the wife of one of the hospital subordinates.

Idem.

G. G. O. 550,  
5th June, 1868.

7. When on the march, all medical subordinates will be supplied with camp equipage.

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Rules for the guidance  
of Purveyors, 1870.

8. When on the march, Purveyors will be allowed a Pâl.

Idem.

9. A European Privates' Tent is allowed for the Apothecaries' and Purveyor's stores.

10. The following scale of carriage is allowed for the transport of Tents:—

3 Camels for each 2 European Privates' Tents.

1 Camel for each Staff Serjeants' Tent.

One Tent Lascar is allowed to each Tent.

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## SECTION LIV.

## TRAVELLING.

1. Officers proceeding on duty to, or between, places not more than five miles from their station, must do so under their own arrangements and at their own expense, if any is incurred.

G. O. 12,  
11th January, 1869.

2. Officers proceeding on duty, under orders from competent authority, are to proceed by the most expeditious available mode of travelling, and, provided the journey is performed without unnecessary delay, at the public expense—charge to be made for the route actually taken, and for no other.

G. G. O. 773,  
22nd September, 1864,  
and  
G. G. O. 139,  
21st April, 1869.

“Duty” will comprise all movements of officers ordered from their stations, for the advantage of the Service, as distinct from their own professional convenience.

An officer about so to proceed must apply at the divisional office of the Quarter-Master General’s Department, or, if time does not admit of this, to the head-quarters of the Division, or the Brigade, or Station Staff Officer on the spot for an extract of the Division or Station Order directing him to proceed.

3. A commissioned or warrant officer proceeding on, or returning from, leave on medical certificate, is travelling on “Duty,” in the sense of G. O. 162, 31st May, 1869. (See para. 7.)

G. O. 103,  
10th May, 1870.

4. When an officer is proceeding by rail on public duty, he is entitled to conveyance as a first-class passenger at second class rates if supplied with a pass, although not entitled to free conveyance.

G. O. 45,  
6th March, 1867.

5. Officers, troops, and others entitled to conveyance by rail at the public expense, are also entitled to transport at Government expense for their servants and followers, agreeably to the scale authorized for inland service, in G. G. O. 1129, 23rd December, 1862.

G. O. 239,  
24th October, 1866.

6. When British commissioned officers, or warrant officers, travel by rail at the Government expense, in the course of relief, or on duty of a permanent nature, and are allowed to take their families with them, free passages will be allowed for their wives and children.

Idem.

This rule applies equally to British officers holding relative or honorary rank.

7. Commissioned or warrant officers travelling "on duty," but without a Government warrant or railway pass, and paying their own fares, are to be allowed to travel in the next higher class of carriage than that for which they purchase tickets, on their producing a certified extract from the Division or Station Order directing them to travel on duty.

G. O. 162,  
31st March, 1869.

Commissioned officers only are to travel first class, and warrant officers second class with 3rd class tickets.

8. An officer absent on leave directed by competent authority to rejoin, on public grounds, if required to proceed by a quicker mode than ordinary marches, is entitled to a free passage by rail or dâk.

G. O. 197,  
17th September, 1866.

9. When an officer is ordered on temporary duty from one station to another, and permanently retained at his destination, in the interests of the service, or permanently posted to any other station, he is entitled to a pass to enable his family to join him.

G. O. 275,  
8th September, 1868.

10. Inconvenience having been experienced owing to detachments, individual officers, soldiers, &c., proceeding by Railway, Horse Van Dâk, Bullock Train, &c., not being provided with passage warrants for the entire journey, despatching officers are, whenever practicable, to supply such warrants for the



different requirements of the journey, from stations of departure to destination.

Separate warrants are required to be furnished for the several lines of railway.

11. The wife of an officer who has been provided with passage under the operation of the Royal Passage Warrant of 1865, when completing her inland journey by rail with her husband, in continuation of the voyage by sea, is permitted carriage at the public expense for six hundredweight of baggage until arrival at corps or station.

G. O. 343,  
14th November, 1868.

12. Officers proceeding by Government transports, whether steamers or sailing vessels, by Government river steamers or by rail, on duty of a nature likely to render the use of camp equipage necessary, will, when practicable, be allowed free conveyance for such camp equipage within the regulated scale; the necessity for taking camp equipage being decided by the authorities sanctioning the passage.

G. O. 52,  
24th February, 1868.

13. When an officer travels at the public expense by Horse Dâk, he is entitled to conveyance for himself, one servant, and baggage to the amount specified by the Dâk Company's regulations.

G. O. C. C.  
15th March, 1862.

14. When travelling by Palkee Dâk or Dooley Dâk, or by mail cart, two bhangywallas will be allowed; a servant is not allowed when an officer is travelling by Palkee Dâk.

G. G. O. 773,  
22nd September, 1864.  
G. O. C. C.  
26th February, 1862.

15. Officers proceeding to England on medical certificate, or who may go home on duty, at seasons of the year when troop-ships do not ply, will be allowed the actual cost of a single passage to England by ship or steamer, the same to be drawn on a contingent bill, accompanied by ship agent's acknowledgment that necessary accommodation has been secured. (See Section XLII., para. 3.)

G. O. 321,  
19th November, 1869.

A free passage by rail for themselves and their families will also be allowed.

16. The services of officers invalided to England are to be utilized for duty with troops, either by the Over-land or Cape route, when required, and when the certificate of the Medical Board does not declare them to be unfit for such duty.

G. O. 263,  
14th September, 1869.

17. Officers provided with Government passage to India are entitled to carry with them the quantity of baggage prescribed for their rank by the Royal Warrant of 1865.

G. O. 309,  
14th October, 1868.

18. The Government of India have sanctioned the extension to the Bengal Presidency of the grant to warrant officers and their families of a free passage by rail to Bombay when ordered to embark in Her Majesty's troop-ships, either on duty or when proceeding to England on leave on medical certificate, under provisions of G. G. O. 1109, 10th November, 1869.

19. Warrant officers proceeding to Europe on sick leave are entitled to their passage to England, and back to India, at the public expense.

G. O. 82,  
6th March, 1868.

20. Warrant officers of the first class, when proceeding as passengers on board Her Majesty's troop-ships, should receive accommodation according to their honorary commissioned rank, and pay messing for their families at the same rate as other officers.

G. O. 340,  
14th November, 1868.

21. When no second class accommodation is available in Her Majesty's troop-ships, warrant officers provided with passages must take such accommodation as is available.

G. O. 217,  
26th June, 1868.

#### *Coasting Steamers.*

(a.)—When European troops are embarked on board *Indian Coasting Steamers*, in which it is possible to carry out the regulations, that one-third of the number of men in health shall always be on watch, on the upper deck,  $7\frac{1}{2}$  superficial feet per man in health will be sufficient.

G. O. 51,  
17th February, 1868.

But in cases when the system of watches may not be practicable, each man in health will have a space of 12 superficial feet allowed to him.

(b.)—Invalids, sick, and women embarked on board such steamers, are to have 15 superficial feet each, and children under 10 years,  $7\frac{1}{2}$  superficial feet; children above 10, same as adults.

(c.)—Should the constituted medical authority deem the full space of 22 feet requisite for cases of extreme sickness, it should be provided.

(d.)—The best parts of the ship are to be appropriated for the sick generally, and effective men should not be allowed to occupy any of the space allotted to the sick.

(e.)—A cabin, or screened berth, is to be set apart for use as a dispensary: an area of 22 square feet will suffice.

13.

*Troops on board Ship.*

Adjutant-General's Cir-  
cular 121 E,  
19th October, 1863.

(a.)—European troops on *board ship* are allowed an uniform space of  $10\frac{1}{2}$  feet per man.

(b.)—The space for hospital cases (should always be reserved near or round a hatchway, into which a wind-sail can be brought,) is calculated at the rate of 21 superficial feet for each man, over and above that to which troops are allotted, for 3 per cent of the number allotted: this space to be screened off.

(c.)—Whenever the strength of a detachment is such as, in the opinion of the medical officer, to require a dispensary, an area of 22 square feet may be allowed.

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## SECTION LV.

## WOMEN—SICK.

1. Inconvenience and discomfort may result to women, particularly to those who have children, if they are obliged to go into hospital on all occasions on which they are sick.

G. O. C. C.  
15th July, 1865.

A soldier's wife should never be required to go into hospital, except for her own advantage and comfort; she should, if not confined to bed, be treated in her own quarters, if this can be done without risk to her own recovery.

The cases in which it is really for her own benefit that she should be admitted, will of course be left to the discretion of her medical attendant.

2. When women or children are labouring under contagious disease, they should, as a matter of course, be invariably removed from the married quarters, and placed under proper isolation in hospital.

Idem.

3. In cases of trifling ailments of themselves or their families, it is expected that the women will attend at the usual hour at hospital, for advice and medicine.

Idem.

4. When selecting the married men whom it is proposed to send to a convalescent hill depôt, the state of health of the women and children of the regiment (of the families) should be taken into consideration.

5. When the state of any woman's health is such as to render it necessary she should have change of climate to Europe, application must be made to the Commander-in-Chief, regimentally, for permission to send her to England.

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6. Women near their confinement are not to be permitted to embark on board any of H. M.'s troop-ships proceeding, viâ Egypt, to or from India.

G. O. 8,  
14th January, 1870.

7. When an insane woman, or child, is sent from a regiment, the information required in pages 106 and 107 of the Medical Regulations, in so far as this applies to her case, should be fully given, along with a statement of her ease.

When an insane woman, or child, is sent to the Asylum at Bhowanipore, Calcutta, the fullest particulars regarding her relatives, place of settlement, &c., are to be forwarded without delay to the Commandant of the Depôt, Chinsurah.

G. O. 249,  
30th July, 1868,

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## SECTION LVI.

## WOUNDS.

1. The attention of medical committees, reporting on wounds received in action by officers, is called to a specification of their duties, as prescribed by G. G. O. 432, 13th July, 1852.

G. O. C. C.  
23rd May, 1864.

(a.)—The Royal Warrant now in force is published in G. G. O. 797, dated 7th September, 1861 :—

“Medical committees assembled to examine wounded officers shall not in future offer any opinion as to the amount of gratuity or pension which should be assigned to such an officer. The duty of medical committees is to record full information as to the nature and extent of the injury sustained, the degree of recovery, whether entire or partial, that may have taken place, the probable permanency or otherwise of such effects, and generally, such explanations as will enable the Commander-in-Chief to recommend, and the Government to assign, a suitable amount of compensation.”

(b.)—It is desirable that in decisions as to the nature and extent of injuries, the phraseology of the regulations, so far as may be possible, be strictly adhered to by medical committees.

2. The wound pension regulations are extended to officers of the warrant grades. Wounded warrant officers permitted to continue on the effective establishment, will be entitled to draw the wound pension now sanctioned, in addition to the pay and allowances of their rank.

G. G. O. 557,  
23rd May, 1867.











